



U.S. Department of Transportation

National Highway Traffic Safety Administration

Dear Crash Data Researchers/Users:

Thank you for choosing crash data from the National Highway Traffic Safety Administration (NHTSA) for your research or other use. The information contained in this motor vehicle crash report is collected, maintained and distributed in accordance with Public Law 89-564. In accordance with this Public Law, NHTSA is required not to release any case information until completion of quality control procedures. These procedures include a review of the case material to extract all names, licenses and registration numbers, non-coded interview material, non-research related researcher comments in the margins, non-factual data, and the production number portion of the vehicle identification number (VIN).

If you requested NHTSA to query its database files in order to identify a specific crash, then that query was made using non-personal descriptors you provided for use in our search. This motor vehicle crash may have been identified from a data search and matches the general, non-personal descriptors you provided, but we cannot confirm that this is the specific crash report you requested.

If you have any questions with regard to the above procedures, please contact the Field Operations Branch, Crash Investigation Division, National Center for Statistics and Analysis at 202-366-4820. Again, please be advised that we cannot confirm that this is the case that you have specifically requested nor can we certify the information to be correct.

*** *** ***



TRANSPORTATION RESEARCH CENTER

Indiana University

ON-SITE AIR BAG INVESTIGATION

CASE NO. - 94-18
FLEET - PRIVATE VEHICLE
LOCATION - NEBRASKA
ACCIDENT DATE - 1994

Submitted By:

Senior Staff Associate
1995

Contract Number: DTNH22-94-D-17058

Prepared for:

U.S. Department of Transportation National Highway Traffic Safety Administration National Center for Statistics and Analysis Washington, D.C. 20590

DISCLAIMERS

This document is disseminated under the sponsorship of the Department of Transportation in the interest of information exchange. The United States Government assumes no responsibility for the contents or use thereof.

The opinions, findings, and conclusions expressed in this publication are those of the authors and not necessarily those of the National Highway Traffic Safety Administration.

The crash investigation process is an inexact science which requires that physical evidence such as skid marks, vehicular damage measurements, and occupant contact points be coupled with the investigator's expert knowledge and experience of vehicle dynamics and occupant kinematics in order to determine the pre-crash, crash, and post-crash movements of involved vehicles and occupants.

Because each crash is a unique sequence of events, generalized conclusions cannot be made concerning the crashworthiness performance of the involved vehicle(s) or their safety systems.

1. Report Ho.	2. Government Accession No.	3. Recipient's Catalog No.
TRC/IU Case No. 94-18		
4. Title and Subtitle		5. Record Parent, 1995
On-Site Air Bag Investigation		6. Performing Organization Code
Private Vehicle Location Nebraska		
		8. Performing Organization Report No.
7. Author's)		TRC/IU 94-18, Task 9504
9. Performing Organization Name and Addre	988	10. Work Unit No. (TRAIS)
Indiana University		
Transportation Research Center		DTNH22-94-D-17058
, Indiana 47403-159	9	13. Type of Report and Period Covered
12. Spensoring Agency Hame and Address		
U.S. Department of Transportation	ion (NRD-32)	1994
National Highway Traffic Safety		
National Center for Statistics and	d Analysis	14. Sponsoring Agency Code
Washington, D.C. 20590		

15. Supplementary Meter

On-site air bag deployment investigation involving a 1992 Ford Taurus LX, 4-door sedan, with manual belts and driver's air bag

16. Abstract

This report covers an on-site investigation of an air bag deployment crash that involved a 1992 Ford Taurus LX, 4-door sedan. The Taurus was traveling northward on a downgrade near the center of a two-lane, undivided, gravel, county roadway. The Taurus (case vehicle) steered right into its northbound lane to avoid a noncontact southbound vehicle. After passing the noncontact vehicle, the case vehicle began to "fish-tail" then subsequently rotated clockwise. The case vehicle continued its clockwise rotation as it travelled north-northeastward and impacted a guardrail on the east side of the road with its front end. The case vehicle's driver-side air bag did not deploy because the Longitudinal Delta V was below the deployment threshold. After impacting the guardrail, the case vehicle continued to rotate clockwise and move northward down the slope before momentarily coming to rest on the bridge facing south-southeast (the case had rotated approximately 175 degrees clockwise). Because the driver was apparently unconscious and the transmission was still engaged, the case vehicle began moving south-southeast and departed the east side of the road going down a steep embankment. As the case vehicle travelled down the incline, it struck a bush, a small tree, and impacted the ground with its undercarriage prior to coming to rest at the bottom facing east-southeast. The ground impact caused the case vehicle's driver side supplemental restraint (air bag) to deploy. The case vehicle's driver (62 year-old female) was also restrained by the available, active, three-point, lap and shoulder belt and sustained, according to her medical records, severe brain injuries including a concussion (AIS-5), multiple fractures, right eye injuries, and multiple soft tissue injuries.

17. Key Words		18. Distribution Statement		
Motor Vehicle Traffic Accident		General Public		
Air Bag	•			
Deployment				
Injury Severity				
19. Security Classif. (of this report)	20. Security Clas	il (al this ages)	21. No. of Pages	22. Price
		sii. (di iins paga)		
Unclassified	Unclassified		101	\$8,500
·	Į.		1	

Form DOT F 1700.7 (8-72)

Reproduction of completed page authorized

TABLE OF CONTENTS

		Page No.
SUMMARY		1
CRASH SCHEM	IATIC	2
ACCIDENT DA	TA	6
AMBIENT CON	IDITIONS	6
ROADWAY		6
TRAFFIC CON	TROLS	7
VEHICLES		7
VEHICLE DAM	IAGE	8
EXTERIOR		8
	ployment Impact	
-	ment Impact	
	·····	
	OCITY ESTIMATES	
	QUENCE	
	1	•
	ants	
•		•
	· · · · · · · · · · · · · · · · · · ·	
	val	
	ORS/OCCUPANT DATA	
	ES	
	MATICS	
AIR BAG SYST		
	COLLISION MEASUREMENT TABLE	
	Police Accident Report	
Appendix B:	Crash Witness Statement	
Appendix C:	Barrier Equivalent CRASHPC Program Results and EDCRASH Pro-	
Appendix C.		
Annandir De	gram Results	
Appendix D: Appendix E:	NASS CDS Accident Form: Case Vehicle	
Appendix G:	NASS CDS Interview Form: Case Vehicle Driver	
Appendix G:	NASS CDS Occupant Assessment Form: Case Vehicle Driver	
Appendix H:	NASS CDS Occupant Injury Form: Case Vehicle Driver	. 57
Body Diag	grams and Medical Records from Original Medical	50
Dadu Di	Facility Submission	
	grams and Medical Records from Rehabilitation Facility	. 68
Body Diag	grams and Medical Records from Updated Medical	0.0
	Facility Submission	. 86

TRC/IU ON-SITE AIR BAG INVESTIGATION

TRC/IU CASE NO. 94-18

FLEET - PRIVATE VEHICLE LOCATION , NEBRASKA

SUMMARY

This report concerns a motor vehicle crash involving an air bag equipped 1992 Ford Taurus LX, four-door sedan occurring on 1994 at 11:40 a.m., near Nebraska on a county road. This crash is of special interest because it was alleged that the driver-side air bag had caused severe head injuries to the driver of the case vehicle.

The Taurus was traveling northward on a downgrade (7 percent) near the center of a two-lane, undivided, gravel roadway. The Taurus steered right into its northbound lane to avoid a noncontact southbound vehicle. After passing the noncontact vehicle, the case vehicle began to "fish-tail" then subsequently rotate clockwise. The case vehicle continued its clockwise rotation as it travelled north-northeastward and impacted a guardrail. The guardrail was located on the east side of the road and was protecting a bridge. After impacting the guardrail, the case vehicle continued to rotate clockwise and move northward down the slope (6 percent) before momentarily coming to rest on the bridge facing south-southeast (the Taurus had rotated approximately 175 degrees clockwise). Because the driver was apparently unconscious and the transmission was still engaged, the Taurus began moving south-southeast up the slope approximately 30 meters (98 feet) departing the east side of the road going down a steep (43 percent grade) embankment. As the Taurus travelled down the incline, it struck a bush, a small tree, and the ground prior to coming to rest at the bottom facing east-southeast.

Initially, the front of the Taurus impacted the guardrail. In the subsequent impacts the right, left, and undercarriage of the Taurus impacted, respectively, a bush, a small tree, and the ground. CDCs for the Taurus were determined to be (in sequential order): 10-FDEW-1, 12-RYES-1, 12-LZMS-1, and 12-UFDW-2. None of the impacts meet the criteria for using the current reconstruction programs. The guardrail is a yielding object; the bush and tree are also yielding as well as not achieving a common velocity with the Taurus, and there is no current method to measure the crush through the undercarriage. Since it was initially alleged that the guardrail deployed the air bag causing severe brain injuries, the CRASHPC and EDCRASH reconstruction programs, damage only algorithm, were used on the frontal guardrail impact (second highest severity) to the Taurus to obtain the barrier equivalent Delta Vs. The Total, Longitudinal, and Lateral Delta Vs are respectively: 13 k.p.h. (8 m.p.h.), -8 k.p.h. (-5 m.p.h.), and +10 k.p.h. (+6 m.p.h). The Taurus's driver-side air bag did not deploy as a result of this frontal impact because the Longitudinal Delta V sustained by the vehicle was below the deployment threshold.

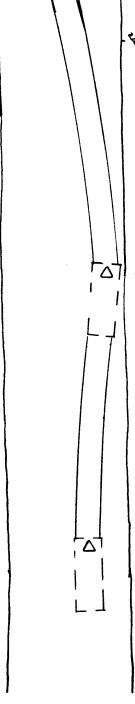
The 1992 Ford Taurus was equipped with a driver supplemental restraint system (air bag) which deployed as a result of the undercarriage impact. The driver of the vehicle (62 year-old female) was also restrained by the available, active, three-point lap and shoulder belt. She sustained, according to her medical records, severe injuries which included: brain injuries [i.e., a concussion (AIS-5), right cerebral contusion, and intraventricular and subarrachnoid hemorrhages], multiple fractures (i.e., right maxilla, nose, and left wrist), right eye injuries (i.e., a partial retinal detachment, hyphema, and vitreous hemorrhage), and multiple soft tissue injuries. The driver of the Taurus was listed on the Police Accident Report as sustaining a "B" (nonincapacitating-evident) injury as a result of this crash.

CRASH SCHEMATIC
Page 1 of 4
TRC/IU CASE NO. 94-18

Scale: 1 in = 20 ft (prior to reduction @ 94%)

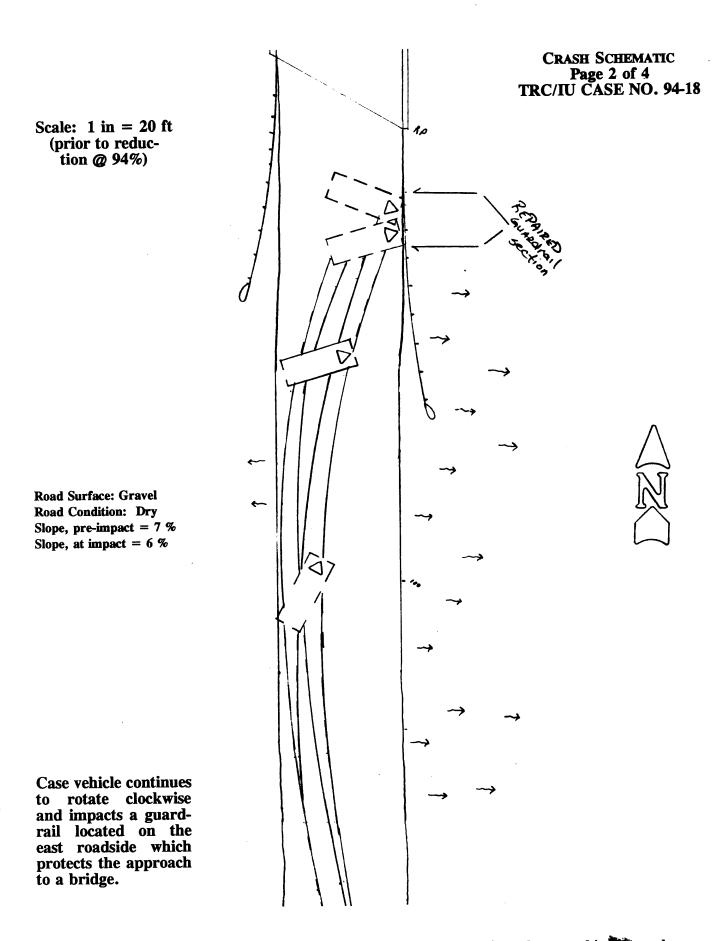
Road Surface: Gravel Road Condition: Dry Slope, pre-impact = 7 % Slope, at impact = 6 %

Case vehicle swerves toward the right and then back toward the left. Case vehicle begins to rotate clockwise.

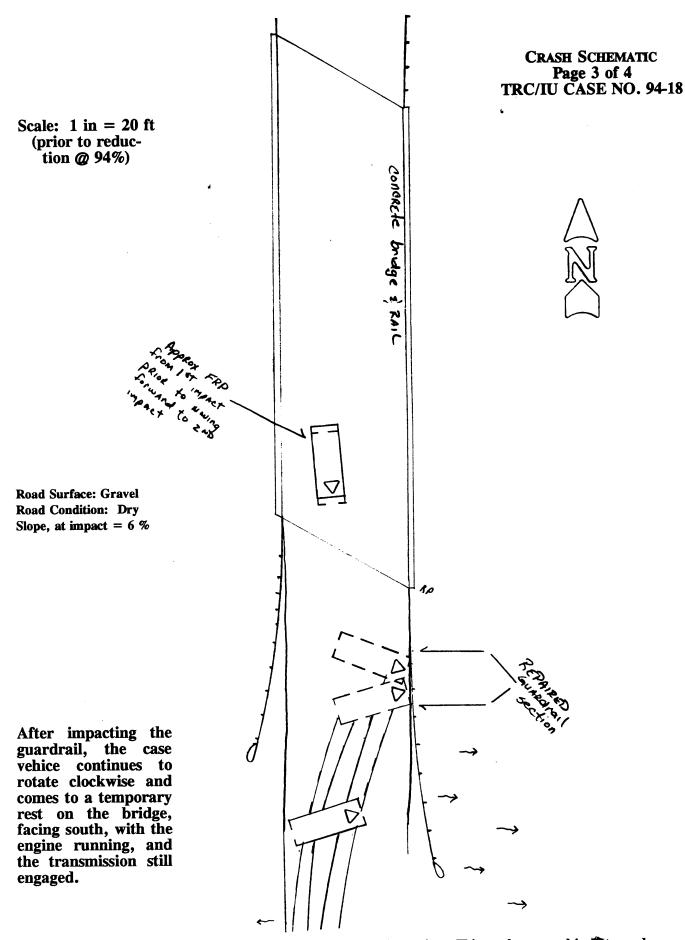




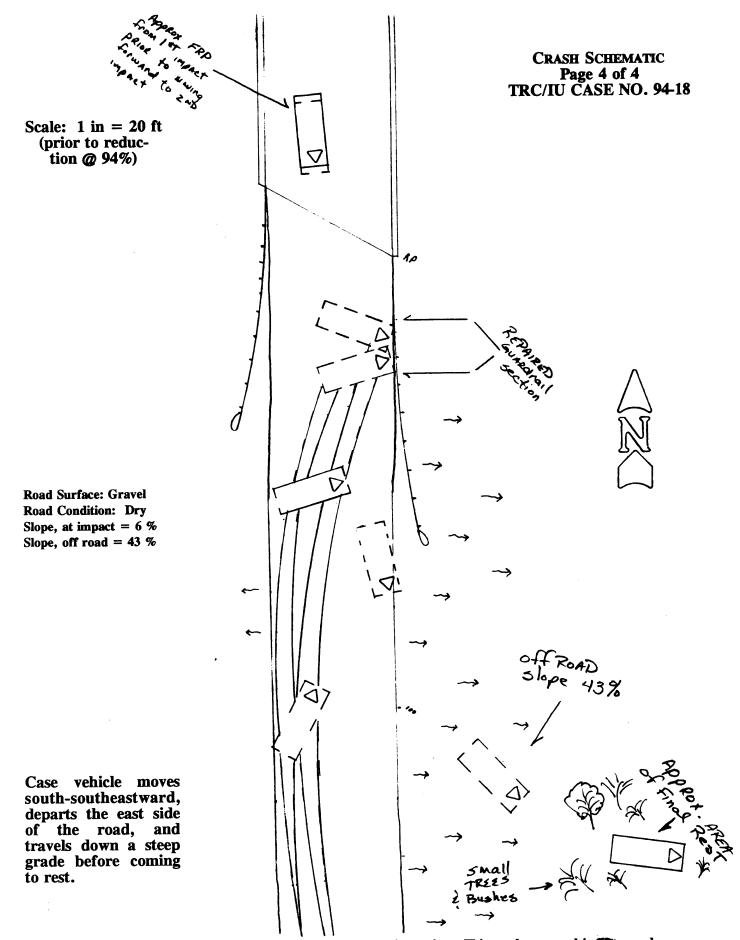
NOTE: No physical evidence was found at the scene during the inspection. This crash occurred in the scene was inspected in the scene was snow covered at the time of inspection. Therefore, this scene diagram is compiled from the measurements taken during the scene inspection, the Police measurements, and the measurements taken by the reconstructionist hired by the Case Vehicle Driver's attorney. The scale used is consistent with the Police measurements.



NOTE: No physical evidence was found at the scene during the inspection. This crash occurred in the scene was inspected in the scene was snow covered at the time of inspection. Therefore, this scene diagram is compiled from the measurements taken during the scene inspection, the Police measurements, and the measurements taken by the reconstructionist hired by the Case Vehicle Driver's attorney. The scale used is consistent with the Police measurements.



NOTE: No physical evidence was found at the scene during the inspection. This crash occurred in and the scene was inspected in the scene was snow covered at the time of inspection. Therefore, this scene diagram is compiled from the measurements taken during the scene inspection, the Police measurements, and the measurements taken by the reconstructionist hired by the Case Vehicle Driver's attorney. The scale used is consistent with the Police measurements.



NOTE: No physical evidence was found at the scene during the inspection. This crash occurred in the scene was inspected in addition, the scene was snow covered at the time of inspection. Therefore, this scene diagram is compiled from the measurements taken during the scene inspection, the Police measurements, and the measurements taken by the reconstructionist hired by the Case Vehicle Driver's attorney. The scale used is consistent with the Police measurements.

TRC/IU ON-SITE AIR BAG INVESTIGATION

TRC/IU CASE NO. 94-18

FLEET - PRIVATE VEHICLE LOCATION - NEBRASKA

ACCIDENT DATA

Location/Street:

County Road

City/Township:

County, near Nebraska

County Sheriff Department

Area/Type:

Rural, agricultural

Accident Date/Time:

1994, @

@ a.m.

Investigating Police Agency:

The state of the s

Accident Type:

Car - ran-off-road

Occupant Injury Severity (air bag vehicle):

Concussion (AIS-5)

AMBIENT CONDITIONS¹

Light Conditions:

Daylight

Weather Condition:

Cloudy

Precipitation:

None

Road Surface:

Dry¹

ROADWAY

Case Vehicle

Location:

County road

Number of Travel Lanes:

2-lanes, undivided

Width:

3.0 meters (10.0 feet)

Surface Type:

Gravel

Median:

None

Shoulders:

None: no improvements noted

According to the Police Accident Report, the road surface was dry; however, SELECTED PHOTOGRAPHS #03, #07, #10, and #22 show the gravel road surface as wet and the bridge pavement as dry.

ROADWAY (CONTINUED)

Case Vehicle

Vertical alignment:

6.25 %, negative to north

Horizontal alignment:

Straight, normal crown

Estimated Coefficient of

Friction:

.55 prior to bridge; .70 on bridge

Traffic Density:

Light

TRAFFIC CONTROLS

Case Vehicle

Signals:

None

Signs:

None

Markings:

Two Type 3 Object Markers: vertical, rectangular, black and yellow markers at beginning of bridge

Speed Limit:

80 k.p.h. (50 m.p.h.)

VEHICLES

Case Vehicle

Year:

1992

Make:

Ford

Model:

Taurus LX

Body Type:

Four-door sedan

V.I.N.

1FACP5344NG-----

Color:

Blue

Mileage:

62,068 kilometers (38,567 miles)

Engine:

3.0 liters, V6, SEFI

Transmission:

4-speed automatic with overdrive

Steering:

Power-assisted, rack-and-pinion

Brakes:

Power-assisted, front disc, rear drum

Padding:

Steering wheel and hub, sunvisors, dash, "A"-pillars,

side door surfaces

VEHICLES (CONTINUED)

Case Vehicle

Active Restraints: 3-point, manual, lap and shoulder belts in front and rear

outboard seating positions; lap belt only at rear center

position

Passive Restraints: Factory installed driver supplemental restraint system (air

bag)

Defects: None

Fleet: Private vehicle

Tow status: Towed, unknown if due to damage

VEHICLE DAMAGE

EXTERIOR Case Vehicle

1st Nondeployment Impact

Event number: One

Object Struck: Guardrail

Damage location

Damaged Plane: Front

Vertical Location

On Plane: Bumper and above Right bumper corner Direct Begins: 139 cm (55.1 in) Length Direct: 140 cm (55.1 in) Field L: 6 cm (2.4 in) C_1 : 6 cm (2.4 in) C_2 : 6 cm (2.4 in) C_3 : 6 cm (2.4 in) C_4 : 6 cm (2.4 in) C_5 : 7 cm (2.8 in) C_6 : 0 cm (0.0 in) D:

Location: C_6

CDC: 10-FDEW-1

Damaged Components: Front bumper and grille

2nd Nondeployment Impact

Maximum Crush:

Event number: Two

2 cm (0.8 in)

VEHICLE DAMAGE (CONTINUED)

EXTERIOR (CONTINUED)

Case Vehicle

2nd Nondeployment Impact (Continued)

Object Struck:

Field L:

Bush

Damage location

Damaged Plane:

Right

Vertical Location

On Plane:
Direct Begins:
Length Direct:

Beltline to sill
Not applicable
Not applicable
Not applicable
Not applicable
Not applicable

C₁: C₂: C₃: C₄: C₅:

Not applicable Not applicable Not applicable

Not applicable

D:
Maximum Crush:
Location:

Not applicable Not applicable Not applicable

CDC:

12-RYES-1

Damaged Components:

Right front mud-flap and right outside rearview mirror

3rd Nondeployment Impact

Event number:

Three

Object Struck:

Small tree

Damage location

Damaged Plane:

Left

Vertical Location

On Plane:

Beltline to above sill

Direct Begins: Length Direct: Field L:

Not applicable Not applicable Not applicable

Not applicable

C₁: C₂: C₃: C₄: C₅:

Not applicable Not applicable Not applicable

C₅: Not applicable C₆: Not applicable D: Not applicable Maximum Crush: Not applicable

Location:

Not applicable

VEHICLE DAMAGE (CONTINUED)

EXTERIOR (CONTINUED)

Case Vehicle

3rd Nondeployment Impact (Continued)

CDC:

12-LZMS-1

Damaged Components:

Left outside rearview mirror, left rear door, and left

quarter panel

Deployment Impact

Event number:

Four

Object Struck:

Ground

Damage location

Damaged Plane:

Undercarriage

Lateral Location

On Plane:

Distributed across the front of the undercarriage area

Direct Begins: Length Direct: Not applicable Not applicable

Field L: C₁:

Not applicable Not applicable Not applicable

C₂: C₃: C₄:

Not applicable
Not applicable

C₅: C₆: Not applicable
Not applicable

D: Maximum Crush:

Not applicable Not applicable

Location:

Not applicable

CDC:

12-UFDW-2

Damaged Components:

Air dam; see SELECTED PHOTOGRAPHS #25, #39, and specifically #40 which shows the area of maximum dam-

age

INTERIOR

Damaged Components:

Steering wheel and air bag module

Other Evidence of

Occupant Contact:

None

Manual Restraint

System Failures:

None

Seat Performance

Failures:

None

REPAIR

Case Vehicle

Cost Estimate:

Unknown, vehicle just now being repaired

VEHICLE VELOCITY ESTIMATES^{2,3}

Second Highest Delta "V" Case Vehicle³

Reconstruction Program: CRASH3PC and EDCRASH

Program Algorithm: Damage only

Travel Speed²: 48 k.p.h. (30 m.p.h.)

Total Delta "V": 13 k.p.h. (8 m.p.h.)

Longitudinal Delta "V": -8 k.p.h. (-5 m.p.h.)

Lateral Delta "V": +10 k.p.h. (+6 m.p.h.)

COLLISION SEQUENCE

Pre-Crash:

According to the Police Accident Report (Appendix A) and the eyewitness (Appendix B), the case vehicle (Taurus) was traveling northward on a downgrade (7 percent) near the center of a two-lane, undivided, gravel, county roadway and was attempting to continue in its direction of travel. According to the eyewitness, the case vehicle steered right, into its northbound lane, to avoid the on-coming, noncontact southbound vehicle. After passing the noncontact vehicle, the case vehicle began to "fish-tail" then subsequently rotated clockwise. The case vehicle continued its clockwise rotation as it travelled north-northeastward toward a guardrail which was located on the east side of the road and was protecting a bridge. Based on the eyewitness's statement, the driver of the case vehicle most likely steered right to pass the eyewitness's on-coming, southbound vehicle, steered left to correct the initial rightward steering maneuver, and then steered right to correct the leftward steering maneuver. Because the case vehicle driver has no recollection of the crash events, it is unclear what if any

Travel speed is based on two factors. First, the case vehicle driver indicated in her interview that she was traveling 48 to 64 k.p.h. (30 to 40 m.p.h.) prior to approaching the bridge. Second, this contractor is of the opinion that she most likely, at least, let up on her accelerator, thus slowing the case vehicle prior to impact.

The case vehicle sustained two frontal impacts, one of which was "distinct" (i.e., the guardrail). Both frontal impacts involved yielding objects. According to 1994 NASS CDS protocol, the delta Vs are not determinable in this situation, and any results are not codeable. The Delta Vs presented above were taken from the reconstruction program results presented in APPENDIX C and show the equivalent barrier Delta Vs resulting from the totality of the frontal crush. The resultant Longitudinal Delta V is most likely below the deployment threshold. The conclusion reached from this approach is that the case vehicle's frontal impact with the guardrail did not deploy the air bag.

The impact which this contractor believes deployed the air bag involved the case vehicle striking the ground as it went down the embankment (i.e., a nonhorizontal impact through the undercarriage).

COLLISION SEQUENCE (CONTINUED)

Pre-Crash: (Continued)

avoidance maneuvers were attempted as the vehicle rotated out-of-control. The case vehicle continued to rotate in a clockwise yaw prior to impact. The crash occurred on the east roadside when the case vehicle impacted the guardrail.

Crash:

According to the Police Accident Report (see SELECTED PHOTOGRAPHS #10 and #11), after the case vehicle impacted the guardrail it continued to rotate clockwise and moved northward down the slope (6 percent) before momentarily coming to rest on the bridge facing south-southeast (i.e., the case had rotated approximately 175 degrees clockwise). Because the driver was apparently unconscious⁴ and the transmission was still engaged, the case vehicle, according to the eyewitness and the physical scene evidence collected by the Police, began moving south-southeast up the slope and departed the east side of the road going down a steep (43 percent grade) embankment. As the case vehicle travelled down the incline, based on our vehicle inspection, it sustained three additional impacts before coming to rest at the bottom facing east-southeast.

Initially, the front of the Taurus impacted the guardrail. The driver's air bag did not deploy as a result of the frontal impact to the guardrail because the Longitudinal Delta V sustained by the vehicle was below the deployment threshold. In the subsequent impacts the right, left, and undercarriage of the Taurus impacted, respectively, a bush, a small tree, and the ground. The ground impact caused the case vehicle's driver side supplemental restraint (air bag) to deploy.

Post-Crash:

Occupants:

According to the witness's statement (see Appendix B) the driver of the case vehicle remained inside the vehicle at final rest. She was unconscious, according to the emergency medical technician's report, and was unable because of her injuries to exit the case vehicle. According to the eyewitness's account and the inspection of the case vehicle, it was equipped with a driver supplemental restraint system (air bag) which deployed during the crash sequence. The case vehicle's driver was also restrained by the available, active, three-point, lap and shoulder belt.

It is this contractor's opinion that the case vehicle driver was knocked unconscious as a result of the guardrail impact. This opinion is based on: (1) the bent steering wheel rim, (2) the open fracture to the case vehicle driver's right facial area, (3) the severe brain injuries to the case vehicle driver which this contractor attributes to the head contact with the steering wheel rim, and (4) the eyewitness's statement that he observed the case vehicle moving slowly southward towards the east roadside after the guardrail impact which indicates that the case vehicle driver was not able to simply apply the brake and stop the vehicle.

COLLISION SEQUENCE (CONTINUED)

Post-Crash: (Continued)

Police: The investigating police agency was notified of the accident within four

minutes and arrived on-scene within ten minutes. Traffic control procedures were established and emergency medical and towing services were called to

assist.

Rescue: According to the Police Accident Report, the eyewitness, and the driver's

medical records, she was transported by ambulance to a medical facility where, according to her medical records, she was hospitalized. Furthermore, according to her medical records, she sustained severe brain injuries which included: a concussion, right cerebral contusion, and intraventricular and subarrachnoid hemorrhages. In addition to her brain injuries, she had multiple fractures (i.e., right maxilla, nose, and left wrist), right eye injuries (i.e., a partial retinal detachment, hyphema, and vitreous hemorrhage), and multiple soft tissue inju-

ries.

Removal: First, the case vehicle was towed from its final rest position at the bottom of the embankment up onto the roadway. Following the police investigation, the

case vehicle was towed from the scene because the driver was incapacitated.

HUMAN FACTORS/OCCUPANT DATA

Case Vehicle

Driver: 62 year-old female

Height: 168 centimeters (66 inches)

Weight: 50 kilograms (110 pounds)

Occupation: Restaurant owner and waitress

Active Restraint

System/Usage: 3-point lap and shoulder/used

Usage Source: Eyewitness and vehicle inspection

Eye glasses/contacts: Contacts

Vehicle Familiarity: Very familiar

Route Familiarity: Daily

Trip Plan: Home to relative (i.e., picking up grandchildren)

Manner of Leaving Scene: Ambulance

Type of Medical Treatment: Hospitalized

Driver Injuries No. 18					
Description of Injury	A.I.S.	Source of Data	Injury <u>Mechanism</u>	<u>Certainty</u>	
Concussion ⁵ with loss of consciousness greater than 24 hours	160214.5,0	2	Steering rim	{Probable}	
Cerebral contusion, right, involving right frontal, parietal, and occipital lobesfairly massive ⁶	140614.3,1	2	Steering rim	{Probable}	
Intraventricular hemorrhage ⁷	140678.4,1	2	Steering rim	{Probable}	
Subarachnoid hemorrhage, location unspecified, probably on right	140684.3,1	2	Steering rim	{Probable}	
Fracture, open ⁸ , right maxilla	250800.2,1	2	Steering hub and/or spokes	{Certain}	
Fracture, comminuted, nose	251004.2,4	2	Steering hub and/or spokes	{Certain}	

The following pertinent medical terms were taken from ILLUSTRATED MEDICAL DICTIONARY, 27th Edition

dysphagia -- difficulty in swallowing

perseveration -- persistent repetition of the same verbal or motor response to varied stimuli; continuance of an activity after cessation of the causative stimulus

The case vehicle driver was unconscious on arrival at the scene of the emergency medical personnel with nonpurposeful movements. In the emergency room she was combative, but responed to painful stimuli. In addition, her right eye was dilated, both pupils were nonreactive, and both eyes were deviated to the right.

During our interview with the driver of the case vehicle, she expressed her frustration with her memory loss and the fact that her doctors cannot give her any prognosis regarding her regaining her memory. According to the driver, the time period of her memory loss extends approximately ten years (i.e., from a short time after the death of her first husband to her hospitalization). Because of her memory loss, she is afraid to ask friends how their spouses are for fear that they have died or divorced and she does not want to hurt anyones feelings. She indicates that she cannot even remember marrying her present husband, and she becomes easily upset when she cannot remember things that she feels she should. According to her current husband, she has become a very private person compared to an active, outgoing, gregarious person she was prior to the crash.

aphasic -- pertaining to or affected with aphasia

aphasia -- defect or loss of the power of expression by speech, writing, or signs, or of the power of expression by speech, writing, or signs, or of comprehending spoken or written language, due to injury or disease of the brain centers

Conflicting evidence is present regarding the case vehicle driver's right cerebral contusion. On the one hand, the contusions which were present in multiple lobes are described as "fairly massive"; however, no evidence of significant midline shifting was reported. Because the latter evidence is more specific than the former, the lower A.I.S. was assigned.

The following definition was taken from a standard dictionary.

Effaced -- to rub out, erase, or obliterate (outlines, traces, inscriptions)

There was a six centimeter laceration on the right cheek extending to the right lip. The cheek and lip lacerations were full-thickness, the cheek laceration extended down to the maxilla.

Driver Injuries (Continued)						
Description of Injury	A.I.S.	Source of Data	Injury <u>Mechanism</u>	<u>Certainty</u>		
Fracture left scaphoid {navicular}	752002.2,2	2	Steering rim	{Probable}		
Retinal detachment, partial, right eye	241002.2,1	2	Air bag	{Probable}		
Hyphema right eye	240604.1,1	2	Air bag	{Probable}		
Vitreous hemorrhage, right eye	241699.1,1	2	Air bag	{Probable}		
Hematoma right eye	297402.1,1	2	Steering hub and/or spokes	{Probable}		
Hematoma left eye	297402.1,2	2	Steering hub and/or spokes	{Probable}		
Hematoma right forehead9	290402.1,7	2	Steering rim	{Certain}		
Laceration, right lip	290602.1,8	2	Steering hub and/or spokes	{Certain}		
Contusion (ecchymosis), facial ⁹ , unspecified	290402.1,9	2	Steering wheel: rim, hub, and/or spokes	{Probable}		
Contusion (ecchymosis) superior chest	490402.1,4	2	Steering rim	{Probable}		
Contusion upper abdomen	590402.1,7	6	Torso belt	{Probable}		
Contusion right shoulder	790402.1,1	6	Steering rim	{Possible}		
Hematoma over left wrist	790402.1,2	3	Steering rim	{Probable}		

DRIVER KINEMATICS

According to the case vehicle driver, she had both hands on the steering wheel. Other than having both hands on the steering wheel, she could not recall her posture at any of her precrash or crash travel locations. Based on the physical evidence captured on the police on-scene photographs and noted by the Accident Reconstructionist hired by the family's attorney, the case vehicle was in a clockwise yaw immediately prior to striking the guardrail. The case vehicle driver has no recollection regarding what, if any, avoidance maneuvers she undertook in response to her vehicle's clockwise rotation. Because of the yaw, the case vehicle's driver may have been leaning slightly to her right. In addition, based on the damage to the case vehicle's steering wheel (see Selected Photographs #45, #47, and #53) and the direction of principal force acting on the vehicle, the driver may have been steering leftward trying to counteract the clockwise rotation.

Several clinical signs indicate the possible presence of a basilar skull fracture [i.e., blood in the right ear canal, cerebrospinal fluid leaking from the right ear, positive battle sign on the right, and bilateral periorbital hematomas (i.e., racoon's eyes)]; however, no such diagnosis was made.

DRIVER KINEMATICS (CONTINUED)

Based on occupant kinematic principles, the impact with the guardrail (10 o'clock PDOF) most likely caused the driver to move forward and leftward loading the torso portion of her active, three-point, lap and shoulder belt. As the driver loaded the torso portion, she most likely twisted the upper right half of her body to the left causing her nose and right side of her face to move toward the top left side of a normally centered steering wheel. However, the rim damage evidence¹⁰ supports the notion that the case vehicle's driver was steering leftward¹¹ trying to counteract the clockwise rotation. In any case, the driver's facial collision occurred with the top right portion of the steering wheel and caused, in all likelihood, the compound right maxilla fracture and comminuted nose fracture and, most likely, her severe brain injuries.

After the endswiping type impact with the guardrail, the case vehicle continued to rotate clockwise. The case vehicle's driver most likely moved leftward toward the left front door with her movement limited by her torso belt and the door. The case vehicle's northerly movement came to a temporary rest with the case vehicle heading southeast (i.e., having rotated approximately 175 degrees from its original direction of travel). At this point the driver had most likely moved rearward into her seatback where she stayed, possibly leaning against the door, as the case vehicle, which was still in gear, proceeded south, back up the hill (+6%), a distance of approximately 30 meters (98 feet) prior to departing the east edge of the roadway. After departing the road, the case vehicle went down a steep embankment (i.e., incline was approximately -43%).

Once again based on principles of occupant kinematics, the case vehicle driver, who in our opinion was unconscious from the guardrail impact, moved forward as her vehicle went down the steep grade and loaded¹² the torso portion of her belt prior to the case vehicle's primary, undercarriage impact to the ground. The exact position of the driver at this point is unknown, but she was mostly leaning forward and maybe leftward against her torso belt. The impact with the ground not only deployed the driver's air bag but most likely accelerated the driver's forward movement and pitched the slumping driver upwards directly into the deploying air bag. It is entirely possible, given the driver's suspected state of consciousness, that the case vehicle driver was leaning over the air bag when it deployed. The contact with the air bag most likely caused the driver's right eye injuries and may have contributed to the seriousness of her head injuries. Due to the use of the driver's available restraints and her slumping posture, the windshield and windshield header area were not contacted. The case vehicle's restraints (i.e., the air bag and belts) appear to have performed as designed given the relatively low energy severity of this crash.

The case vehicle driver was most likely driven rearward and probably leftward as a result of the air bag's deployment. According to the eyewitness, who is also an EMT, the driver was facing outward towards the the driver's window upon his reaching the case vehicle at final

¹⁰ The steering wheel rim was deformed approximately 2.5 centimeters (1 inch), and the deformation occurred to the top right side.

¹¹ A leftward steer input would rotate the top right portion of the steering wheel rim to the left.

¹² This loading most likely resulted from a combination of the steep incline and the rough terrain, as well as the case vehicle's impacts to a thick bush and the limbs of a small tree.

DRIVER KINEMATICS (CONTINUED)

rest. This posture may explain the large amount of blood on the driver's door, torso belt, and outward edge of the driver's seat. The eyewitness reported that he went to call for help, and upon returning to the case vehicle, he indicated that the driver was now facing straight ahead and slumped over a bit, but held up by her torso belt. The witness reported that the case vehicle's driver was wearing her lap and shoulder belt in the proper manner. In this contractor's opinion, this sequence of events (i.e., the case vehicle's driver striking the steering wheel with her face as a result of the guardrail impact and causing the open fracture followed by the case vehicle driver being slumped over on or near the steering wheel when the air bag deployed in the primary impact) explains why the blood was splattered on the air bag and the driver's side dashboard.

AIR BAG SYSTEM

DRIVER AIR BAG

Deployment Threshold: 13 to 23 k.p.h. (8 to 14 m.p.h.)

Airbag Diameter (seam-to-

seam, deflated): 65 centimeters (25.6 inches)

Number of Vent Holes: Two

Vent Hole Diameter: 2.2 centimeters (0.9 inches)

Vent Hole Clock Positions: Eleven and one o'clock

Generant Residue: None detected during vehicle inspection

ACCIDENT COLLISION MEASUREMENT TABLE



U.S. Department of Transportation National Highway Traffic Safety Administration

ACCIDENT COLLISION MEASUREMENT TABLE

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

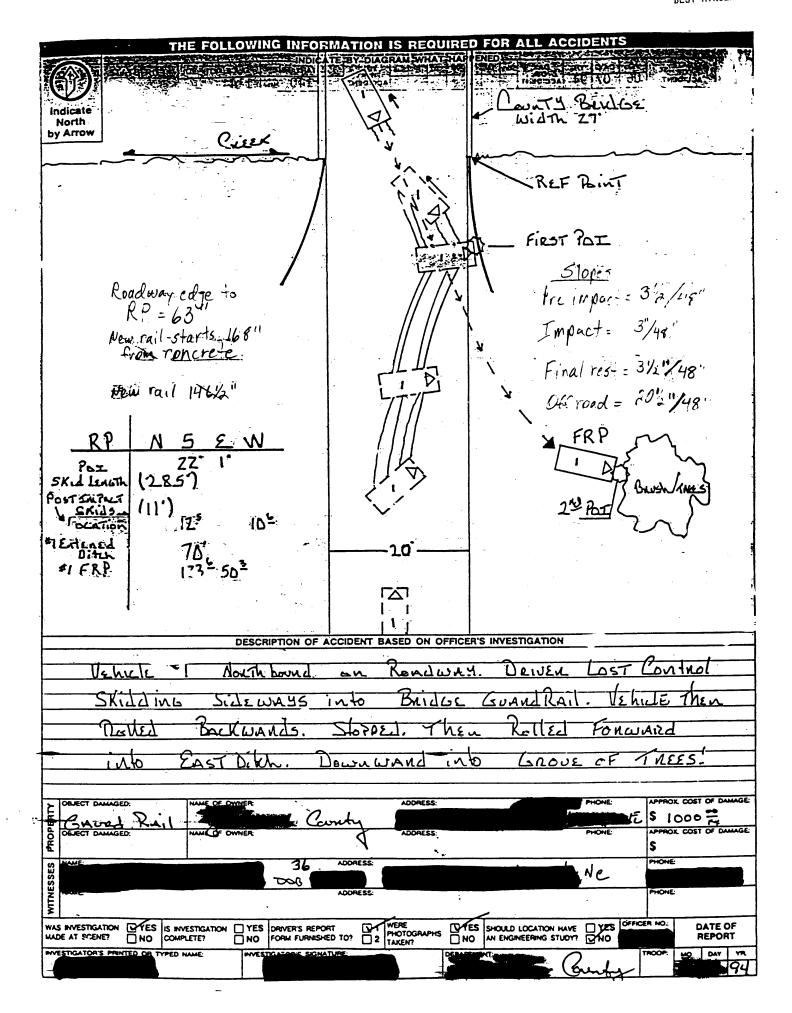
Primary Sampling Unit Number	<u> </u>	Case N	lumber	–Stratum $\underline{\mathcal{G}}$	418	
ACCIDENT COL LEVEL I PHYSICAL EVIDENCE ABSENT To be accomplished when there is no physical evidence present at the scene: approximate vehicle orientation at impact and final rest applicable road/roadway delineation (e.g., curbs/edge lines, lane markings, median markings, pavement markings, etc.) applicable traffic controls (e.g., speed limit) north arrow placed on diagram sketch required LEVEL II PHYSICAL EVIDENCE PRESENT In addition to the level I tasks noted above, the following must be accomplished when	LLISION DIAGRAM LEVEL II (Cont'd) physical evidence is present: document reference point and reference line relative to physical features present at the scene scaled documentation of all accident induced physical evidence scaled documentation of all roadside objects contacted roadway surface type and condition of applicable roadways grade measurements for all applicable roadways and at location of rollover initiation scaled representations of the vehicle(s) at pre-impact, impact, and final rest based upon either: a) physical evidence, or b) reconstructed accident dynamics			CRASH DATE VEH. #1 g Angle O Type OPAVE Type OPAVE	VEH. #2 VEH. #3	
Reference Point: <u>south</u> <u>edge of</u> Reference line:						
ltem		Distance and Directory Reference Po		Distance an from Refer		
Note: At tin	ne of	ocene in	spe	ction	the	
scene wa	5 5 NO	w covere	<u>d</u>	MAKING	Any	
<u>MEASUrement</u>	3 dif	, ~ 1	JOR	1	MEAS.	
ARE From FIRM DIAG	PAK	¿ Private		<u>econstr</u> i	uction	
	1					
					•	

ltem	Distance and Direction from Reference Point	Distance and Direction from Reference Line
	-	
•	×	

Appendix A:

POLICE ACCIDENT REPORT

!	ŇÝF	STIGATO	R'SAMO	TOR-VEHIC	CLE-A	CCIDENT	REPOR	Case No.		Sheet 1
-	4:	DATE	MO. DAY	YR DAY	1 - 1 -	F S		MILITARY TIME	POUCE NOTIFIED	FOR STATE USE ONLY
	1	OF ACCIDENT		94 ACCIDENT	'any	X	ACCIDENT	Hrs.	POLICE ARRIVED	
-	لت	PLACF OF ACCIDENT	COLINTY:		1	1			Hrs.	
-	OF VED	BOAD ON WHICH	STREET OR HIC	HWAY NO: IT NO HIGH	way Number.	Identify By Name)		ONE-WAY STREET	POSTED SPEED LIMIT	
	R V	ACCIDENT OCCURRED	NW C	:h				YES NO X	50 мрн	
1.	BE	DISTANCE	FEET:	N S E	+	ULEPOST:	HIGHWAY NO.	YE	NATE PROPERTY	Dist.
	2 ഗ	MILEPOST	T INTERSE	ETION	I. No.	·		IE NOT AT INTE	RSECTION	
+	2 11	NAME OF INTERSEC			**XXM	ILE N.	S E W OF	NEARTST STREET OF	HIGHWAY, BRIDGE RA	NILROAD CROSSING OR MILEPOST:
1	OTAL				.4			WY#	AREST CITY OR TOWN.	
	TO VEI	OUTSIDE CITY HONCATE DIS	LIMITS.	LES:	N S E	X- 4.5	N X	S E W OF NE	th & ST.	
7		PHOM NEARES	TIOWN	NUMBER		^		VEHI		ER - 2
٦	DRIVER.				PHONE		DRIVER			PHONE:
1	DRIVER'S	AD00555		CITY STATE OF	-		DRIVER'S ADDRE	SS:	CITY, STA	TE. 20P:
	DRIVER	S STATE NUMBER		E .	DATE	OF BIRTH SEX		TATE NUMBER		DATE OF BUTTH ME
4	LICENS	E NE	STATE: NU	62	ESTIMATE	DAMAGE	LICENSE	YEAR: STAT	TE: NUMBER:	ESTINATED DAMAGE
=	ш -	LATE 94	NE		\$ 1000)' 	O YEAR	TMKE:	MODEL: 18	ODY.ETYLE: COLOR
1	EHICL BOW	2 FORD		UR LX 4D		GREY	注			
1	3 1	CLE LO. NÚMBER (VIN). FACP5344NG			YES NO	٠ .	NEHOLE 10.	NUMBER (VIN):		CITATION: YES
4	OWNER	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			PHONE		OWNER:			PHONE:
	OWNER'S	ADDRESS:		CITY, STATE ZIP	11		OWNER'S ADDRE	SS:	CITY, STA	TE, ZIP:
1		AS DRIVER	(;; <u> </u>				INSURANCE COM	PANY:		
	POLICY N	WASTP .					POLICY NUMBER	/		
=							TOWER TO:		TOWED BY:	
\exists	IOWED I	0		TOWED BY:	TO	VING	10.		TOWED BY:	
		VEHICLE MOVEM	ENT	CIRCLE POINT OF	MPACT.	DISPOSITION (Check one p			EHICLE DEFORMITY	(Check one per vehicle).
5	N S	E W ROAD OR HK	SHWAY NAME	2 1 3 1 4	VEH	VEHICLE 1 2	-	VENCLE	VEHICLE \	VENCE S
7	1 X	NW	h				l-due to damages l-other reasons	2 Minor 3 Modera	5 C C Uniono	
	VEHI	CLE			• •	3 Cleft at	away	MAJOR REASO	N FOR NOT SEEING	4 Drinking 5 Hegal drugs
از	102	2ر Going ahead		9 Top & windo		5 Unkno		VEHICLE 1 2		6
5		Passing Turning right		11 All areas 12 Unknown	,-	· (Check one, p		1 Nove	snow, or ice on windows	8 COther (Specify)
		Turning left." Making "U" turn	, !	2 3 7	VEH	VEHICLE		4 Clare		ALCOHOL TESTING
∞€ 1	誯	Slowing down Staning in traffic Staning from pa			2		parent defects ive brakes ive lights	5		ALCOHOL
出		Backing up Stopped in traffi					ive signals	8 Traffi	ic sign pard	TESTED Y N
£4.	128	Staffed in traffic Parked		9 Dop & winds	ws	6 Defect	ive tires	10 Park	and controlled and the Difference of the Differe	river No. 1 A
1		Unproperty park Unproperty park	ļ	10 Undercarria	ge .	8 C C Corner	(Specify)	12 - 000	r (Specify)	edestrian
늬	15	Changing lanes		12 Unknown	DID		T			DID (1) IE NO
		RESTRAINT	USE 1	AIR BAG	AIR BA	Y7 AIR BAG	RI	ESTRAINT USE		BAG AIR BAG (✓) IF NO AIR BAG AVAILABLE
			VEH	Driver Seat	X	NO .	$\left\{ \left[-\right] \right\} $	$+\Box$ /	VEH Driver S	OSITION YES NO
	Ŀ	4	1	Front Passenge	+] [2	assenger
	1 - No	Esuanti avanabe	5 - Automatic	ben HELMET	MOTORCY	CLE BICYCLE	1 - No restrain	n available 5 - Aut		MET MOTORCYCLE BICYCLE
8		traint not used	6 - Child restra 7 - Unknown		YES	NO YES NO	2 - Restraint		ild restraint	SE YES NO YES NO
		& shoulder bett		Passenger	+		4 - Land show		Passen	
Ì	COMP	PLETE THIS SE	CTION FOR	ALL INJURED P	ERSONS	RESCUE			DATE	SEX 1 2 3 4 5
				ore than three we		I UNITS AT		_	OF BIRTH	M F Seat Eyect Body Pig Trans
	VEH. I N	ME.			ADDE	VF				F 1 1 1 Z 1
	VEH. 8 N	ME			ADDF	RESS				
	VER & N	ME			ADDF	ÆSS				
I	.]						CES DR FORM 40.			



Appendix B:

CRASH WITNESS STATEMENT

MEMORANDUM

Date: 1994
From: File
Re:

1994, I spoke with is a member of the Volunteer Fire Department at At the time of the accident, he was returning from an emergency call. He had crossed the bridge and started up the hill to the south going in a south-bound direction. came over the hill and he said that she was a little bit toward the center of the road, like most people drive. While he did not view her very long, he does not believe that she was traveling particularly fast. As she started to move over to go by him, she started fish tailing. She was still fish tailing as she went past him, and he thought that she would simply regain control and that there would be no problem. Nevertheless, he watched in his rear view mirror and saw her hit the quardrail. He saw her hit it "kind of hard, but not too hard." Still he did not think things were very serious. immediately turned around to go make sure, and as he turned he saw her coming back very slowly to the south. At this time he was still maneuvering his car to turn around, but when he looked back one last time he saw the back of least 's car disappearing down the slope.

Being an Emergency Medical Technician, Mr. got to the car as quickly as he could. He found all the doors locked, and he could see that was hurt pretty badly. However, he could see that she was breathing. He knew that he would need help, and he knew that no one would see him there, so he immediately left to go get help. No one was home at the nearest house, so he was forced to drive a quarter of a mile east down the highway. This was the residence. He told them to call 911, and then Mr. ! returned to the scene. Mr. had a sledge hammer in his pickup, and he used that to break the right rear window. He picked this window to break because it was the furthest from Mr. indicated that when he was at the car the first time, was facing out the driver's side window. When he came back the second time, he found her looking straight ahead and slumped over a bit, but held up by the shoulder strap. She was wearing the seat belt and shoulder harness in the proper manner. He saw that was breathing in a strained fashion, so he cleared the air way and applied traction to the head. This helped her breathing, but she still was not breathing normally. had a gash on the right side of her nose. At about this time, the sarrived. He had them get some bandages he carries in his pickup and he was able to slow or stop the bleeding.

Mr. never noticed the air bag. He did not notice it while the accident was happening, and he never noticed it while he was trying to get her out of her car.

Mr. indicated that like everybody else, he was very surprised at the severity of the injuries, based on the severity of the crash. He said he was not surprised that we were looking into this.

Mr. was extremely helpful and I believe that he will make himself available to anyone at any time to help on this matter.

Appendix C:

BARRIER EQUIVALENT CRASHPC PROGRAM RESULTS

AND EDCRASH PROGRAM RESULTS



U.S. Department of Transportation

CRASHPC PROGRAM SUMMARY

National Righway Traffic Sa Administration	ilety	(All Measureme	SUITZ III IMPERIAC	CR	ASHWORTHINE	SS DATA SYSTEM
Identifying Title Primary Sampling Unit	Case NoStratum		cident Event quence No.	Date (Month,	day, year) of F	
CRASHPC Vehicle Id	dentification					
Vehicle 1	1992	FORD		TAURUS	> LX	
Vehicle 2						
	. Year	Make		Model		NASS Veh. No.
	G	ENERAL IN	ORMA"	TION		
	VEHICLE I			VEHICLE	2	,
Size		<u>3</u>	Size			<u>//</u>
Weight 1399+ 50 + Curb Occupant(s)	Cargo = / 4/ 4/	<u>49</u> kg	Weight	+ + + = = = = Occupant(s) Cargo	:	kg
CDC	IOFDE	ω	CDC			
PDOF (-180 to +18	30) + 3	100		180 to +180)		•
Stiffness		3	Stiffnes			
		COENE INIE	DDMAT	ON	-	
		SCENE INFO				
Rest and Impact Po	sitions [] No, <i>Go 1</i> VEHICLE 1	o Damage Info	rmation	[] Yes VEHICLE	Ē 2	
Rest Position	x	m	Rest	X		m
rosition	Υ	m	Position	Y		m
	PSI	· · · · · ·		PSI		· °
<u>I</u> mpact	×	. m	impact	X		. m
Position	Υ	_ · m	Position			. m
·	PSI			PSI		•
Slip Angle(-180 to -	+ 180)	•	Slip An	gie (-180 to +180)		
		VEHICLE	MOTIO	N		
Sustained Contact	I I No I I Yes	:		-		
	VEHICLE 1			VEHICL	E 2	
Vehicle Rotation	F 1.41_		Vertical Co			
Rotation Stop B		[] Yes		Rotation ation Stop Before Re	[] No st [] No	60000000007000007
End of Rotation Position	x	m		of Rotation X		m
. 55.0011	Υ	m	1.08	ition Y		m
	PSI	o	i	PSI		°
Curved Path	[] No	[] Yes	Curved	······································	[] No) [] Yes
Point on Path X .	m Y	m		nt on Path	Υ	~
				m		· m
Rotation Direction Rotation > 360°	[] None	[CCW	Rotation Rotation	n Direction [] No on >360° [] No		

National Accident Sampling System-Crashworthiness Data System: CRASHPC Program Summary

FRICTION	INFORMATION	TRAJECTOR	Y INFORMATION	
Coefficient of Friction		Trajectory Data []	No [] Yes	
Rolling Resistance Op		If No. Go To Damage	Information	
		Vehicle 1 Steer Angle	s	
Vehicle 1 Rolling	Resistance	LF		_ °
	RF	LR		- °
LR	RR			
Wakista 2 Balling	Basistanas	Vehicle 2 Steer Angle		_
Vehicle 2 Rolling	RF	LF		- 。
	RR	LR	nn	-
		Terrain Boundary	1 No [] Yes	
		-	•	
		First Point		
		X m	Y	_ m
		Second Point		
		X	Y	_ m
		Secondary Coefficient	of Friction	—
	DAMAGE IN	NFORMATION		
V	'EHICLE 1	VI	EHICLE 2	
Damage Length	L <u>140</u> cm	Damage Length	L	cm
Crush Depths	C,ccm	Crush Depths	c,	cm
	C ₂		C ₂	cm
	C ₃ cm		C ₃	cm
	C		C ₄	cm
	C_5 C_5 cm			cm
	C ₆ cm		C ₆	cm
Damage Offset	D ±	Damage Offset	D ±	cm
-		-		
IF THIS COMMON IN	IPACT WAS WITH A MOTOR VEHICL	E <i>NOT IN TRANSPORT,</i> FILL	IN THE INFORMATION BELOW	w.
Model Year:		The Weight, CDC, Scen	e Data and Damage Informat	tion
		for this vehicle should b		
		· .		
//A.L.				

SUMMARY OF CRASHPC RESULTS USING DAMAGE

CRASH3 RECONSTRUCTION

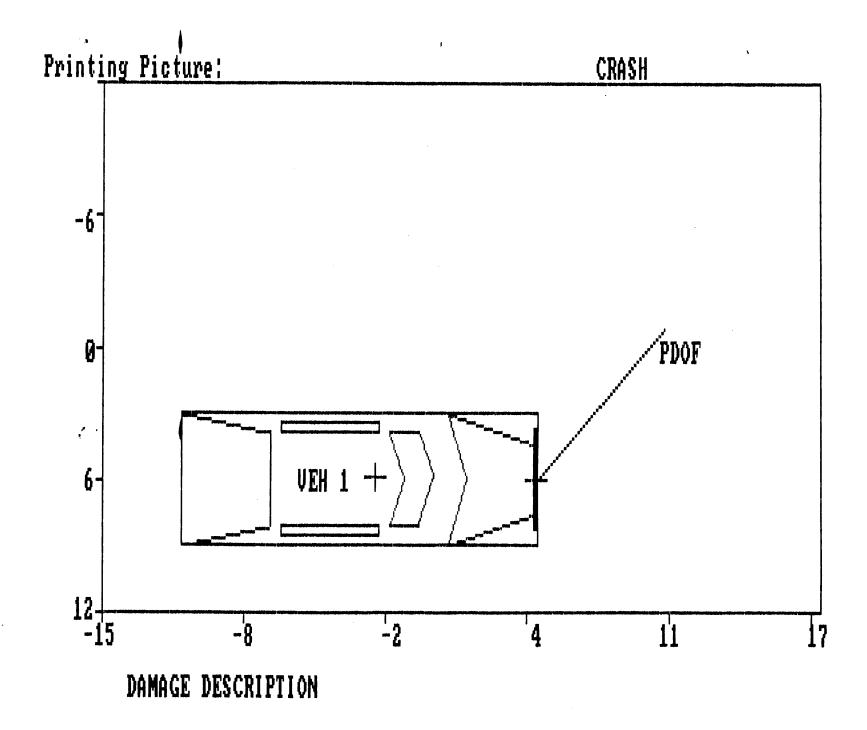
	SPEED CHANGE (DAMAGE)
VEHICLE #1 TOTAL LONGITUDINAL LATITUDINAL PDOF ANGLE ENERGY DISSIPATED =	
VEHICLE #2 TOTAL LONGITUDINAL LATITUDINAL PDOF ANGLE ENERGY DISSIPATED =	O KPH (O MPH) O KPH (O MPH) O KPH (O MPH) O DEGREES O JOULES (O FT-LB)

DAMAGE DATA

	VEHICLE #1	VEHICLE #2
SIZE CATEGORY STIFFNESS CATEGORY	3 	1 1 O
VEHICLE WEIGHT	1449 KGS (3194 LBS) 10FDEW1	***** KGS (2204586 LBS) * BARRIER
CDC PDOF ANGLE	-50 DEGREES	O DEGREES *
CRUSH LENGTH	140 CM. (55 IN.) 6 CM. (2 IN.)	0 CM. (0 IN.) *
C2 C3	6 CM. (2 IN.) 6 CM. (2 IN.)	0 CM. (0 IN.) * 0 CM. (0 IN.) *
C4	6 CM. (2 IN.) 6 CM. (2 IN.)	0 CM. (0 IN.) * 0 CM. (0 IN.) *
C5 C6	6 CM. (3 IN.)	0 CM. (0 IN.) * 0 CM. (0 IN.) *
D ,	0 CM. (0 IN.) 1 CM. (0 IN.)	0 CM. (0 IN.) *
		(* INDICATES DEFAULT VALUE)

DIMENSIONS AND INERTIAL PROPERTIES

	VEHICLE #1	VEHICLE #2
CG TO FRONT AXLE CG TO REAR AXLE TRACK CG TO FRONT OF VEH CG TO REAR OF VEH	130 CM. (51 IN.) 141 CM. (56 IN.) 150 CM. (59 IN.) 228 CM. (90 IN.) -270 CM. (-106 IN.) 92 CM. (36 IN.)	127 CM. (50 IN.) 127 CM. (50 IN.) 127 CM. (50 IN.) 127 CM. (50 IN.) -127 CM. (-50 IN.) 127 CM. (50 IN.)
CG TO SIDE OF VEH MOMENT OF INERTIA VEHICLE MASS	92 CM. (36 IN.) 12523 KGS (27609 LBS) 4 KGS (8 LBS)	****** KGS (****** LBS) 2600 KGS (5732 LBS)



SUMMARY OF EDCRASH RESULTS S/N: 0266-8 Version: 4.61
Date: \$\frac{1}{2} \frac{1}{2} \frac{1}{

Lic. User: NHTSA #8

MESSAGES:

NO MESSAGES

VEHICLE # 1

IMP SPE km	ED	sı	PEED CHAI	NGE	BASIS FOR
FWD	LAT	TOTAL	LONG.	LATERAL	RESULTS
N/A	N/A	N/A	N/A	N/A	SPINOUT TRAJECTORIES AND CONSERVATION OF LINEAR MOMENTUM
N/A	N/A	N/A	N/A	N/A	SPINOUT TRAJECTORIES AND DAMAGE
		13.0	-8.4	10.0	DAMAGE DATA ONLY

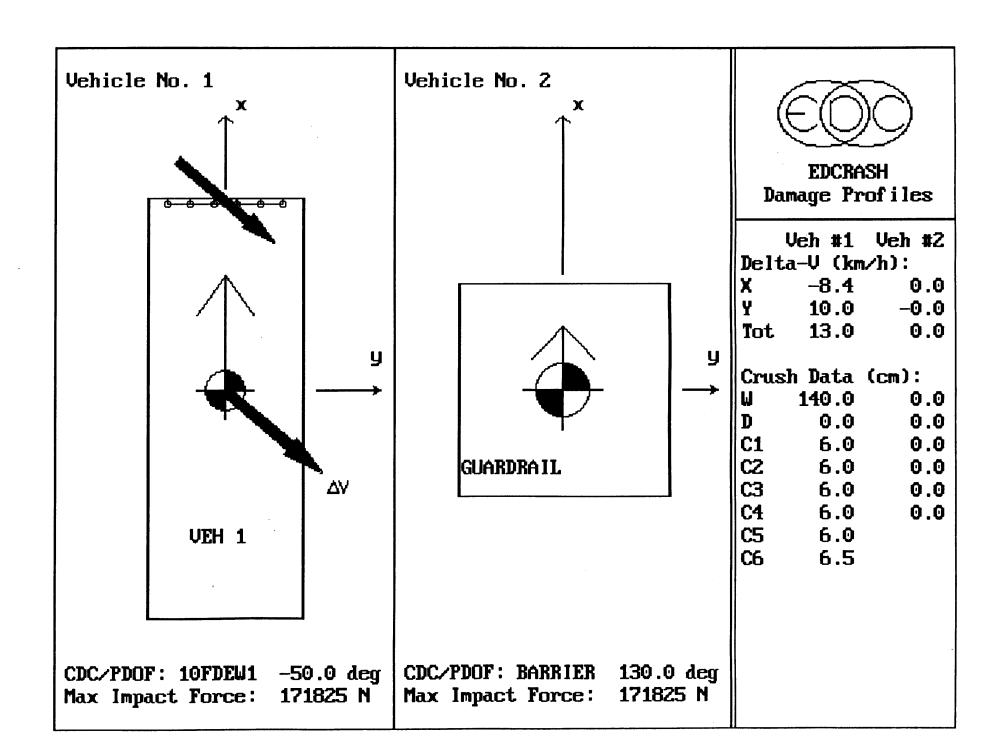


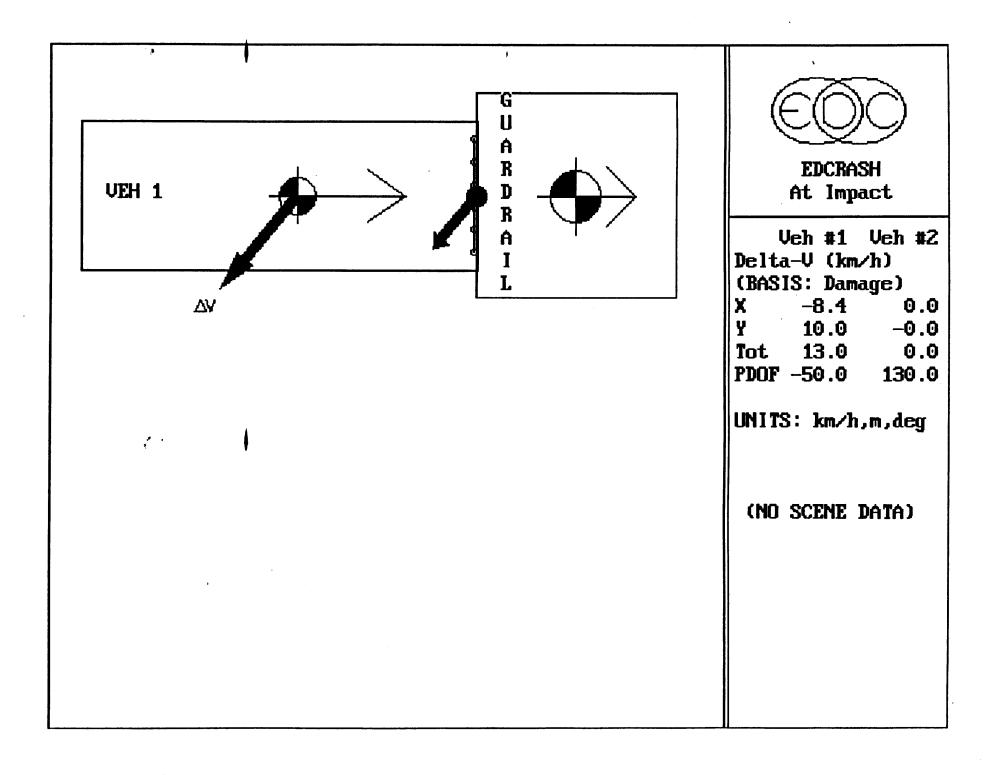
SUMMARY OF DAMAGE DATA (NOTE: '**' indicates default value)

	Vehicle #1	Vehicle #2
CLASS / STIFFNESS CATEGORIES	3 / 3	11 /11
WEIGHT	1449.0 kg	453514.8 kg **
CDC	10FDEW1	BARRIER
DAMAGE WIDTH	140.0 cm	0.0 cm **
CRUSH DEPTH 1	6.0 cm	0.0 cm **
CRUSH DEPTH 2	6.0 cm	0.0 cm **
CRUSH DEPTH 3	6.0 cm	0.0 cm **
CRUSH DEPTH 4	6.0 cm	0.0 cm **
CRUSH DEPTH 5	6.0 cm	
CRUSH DEPTH 6	6.5 cm	
DAMAGE MIDPOINT OFFSET	0.0 cm	0.0 cm **
DAMAGE ENERGY	22612.1 Joules	0.0 Joules
MAGNITUDE OF PRINCIPAL FORCE	171824.8 N	171824.8 N
DIRECTION OF PRINCIPAL FORCE	-50.0 deg	130.0 deg **
MOMENT ARM OF PRINCIPAL FORCE	172.7 cm	0.0 cm
DAMAGE CENTROID	0.5 cm	0.0 cm

DIMENSIONAL, INERTIAL AND CRUSH STIFFNESS PROPERTIES (NOTE: '**' indicates default value)

	Vehic	le #1		Vehic:	le #2	
CG TO FRONT AXLE	130.3	cm	**	127.0	cm	**
CG TO REAR AXLE	141.0	cm	**	127.0	cm .	**
TRACKWIDTH	149.6	cm	**	127.0	cm	**
YAW MOMENT OF INERTIA	3105.0	kg-m^2	**	1000000.0		**
MASS	1446.6	kg		3105.0		**
BODY LENGTH FROM CG TO FRONT	228.1	cm	**	127.0	cm	**
BODY LENGTH FROM CG TO REAR	-270.3	cm	**	-127.0	cm	**
BODY OVERALL WIDTH	184.4	cm	**	254.0	cm	**
CRUSH STIFFNESSES: A		В		A	В	
lb/i	in	lb/in^2		lb/in	lb/in^2	
317.	4 **		1000		1000000.0 *	*





Appendix D:

NASS CDS ACCIDENT FORM

Department of Transportation

B below) checked adies not
checked dies not
0
^
_0
0
0
<u>0</u> <u>4</u>
the other
General Area of Damage
General Area of
General Area of

IF GREATER THAN FIVE EVENTS, CONTINUE CODING ON THE ACCIDENT EVENT SUPPLEMENT

41. ____ 42. ___ 43. ___ 44. ___

26. <u>0</u> <u>3</u> <u>27. <u>0</u> <u>1</u> <u>28. <u>0</u> <u>3</u> <u>29. <u>L</u> <u>30. <u>4</u> <u>1</u> <u>31. <u>0</u> <u>0</u> <u>32.0</u> 33. <u>0</u> <u>4</u> <u>34. <u>0</u> <u>1</u> <u>35. <u>0</u> <u>3</u> <u>36. <u>U</u> <u>37. <u>6</u> <u>0</u> <u>38. <u>0</u> <u>0</u> <u>39. 0</u></u></u></u></u></u></u></u></u></u></u>

CODES FOR CLASS OF VEHICLE

- (00) Not a motor vehicle
- (01) Subcompact/mini (wheelbase < 254 cm)
- (02) Compact (wheelbase ≥ 254 but < 265 cm)
- (03) Intermediate (wheelbase ≥ 265 but < 278 cm)
- (04) Full size (wheelbase ≥ 278 but < 291 cm)
- (05) Largest (wheelbase ≥ 291 cm)
- (09) Unknown passenger car size
- (11) Compact utility vehicle
- (12) Large utility vehicle (≤ 4,500 kgs GVWR)
- (13) Passenger van (≤ 4,500 kgs GVWR)
- (14) Other van (≤ 4,500 kgs GVWR)
- (15) Pickup truck (≤ 4,500 kgs GVWR)
- (18) Other truck (≤ 4,500 kgs GVWR)
- (19) Unknown light truck type
- (20) School bus
- (21) Other bus
- (22) Truck (> 4,500 kgs GVWR)
- (23) Tractor without trailer
- (24) Tractor-trailer(s)
- (25) Motored cycle
- (28) Other vehicle
- (99) Unknown

CODES FOR GENERAL AREA OF DAMAGE (GAD)

CDS APPLICABLE AND OTHER VEHICLES

TDC APPLICABLE VEHICLES

- (0) Not a motor vehicle
- (N) Noncollision
- (F) Front
- (R) Right side
- (L) Left side
- (B) Back
- (T) Top
- (U) Undercarriage
- (9) Unknown

- (0) Not a motor vehicle
- (N) Noncollision
- (F) Front
- (R) Right side
- (L) Left side
- (B) Back of unit with cargo area (rear of trailer or straight truck)
- (D) Back (rear of tractor)
- (C) Rear of cab
- (V) Front of cargo area
- (T) Top
- (U) Undercarriage
- (9) Unknown

CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED

401-30) - Vehicle Number

Noncollision

- (31) Overturn rollover
- (32) Fire or explosion
- (33) Jackknife
- (34) Other intraunit damage (specify):
- (35) Noncollision injury
- (38) Other noncollision (specify):
- (39) Noncollision details unknown

Collision With Fixed Object

- (41) Tree (≤ 10 cm in diameter)
- (42) Tree (> 10 cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment
- (45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post

- (50) Pole or post (≤ 10 cm in diameter)
- r=(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)
 - (52) Pole or post (> 30 cm in diameter)
 - (53) Pole or post (diameter unknown)
 - (54) Concrete traffic barrier
 - (55) Impact attenuator
 - (56) Other traffic barrier (includes guardrail) (specify): <u>Quandrail</u>

- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify):
- (69) Unknown fixed object

Collision with Nonfixed Object

- (71) Motor vehicle not in-transport
- (72) Pedestrian
- (73) Cyclist or cycle
- (74) Other nonmotorist or conveyance
- (75)-Vehicle occupant
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (79) Object fell from vehicle in-transport
- (88) Other nonfixed object (specify):
- (89) Unknown nonfixed object
- (98) Other event (specify):
- (99) Unknown event or object

Appendix E:

NASS CDS VEHICLE FORMS: CASE VEHICLE



U.S. Department of Transportation National Highway Traffic Safety Administration	GENERAL VEHICLE FORM NATIONAL ACCIDENT S CRASHWORTHINE	AMPLING SYSTEM SS DATA SYSTEM
1. Primary Sampling Unit Number 2. Case Number - Stratum 3. Vehicle Number VEHICLE IDENTIFIC 4. Vehicle Model Year Code the last two digits of the (99) Unknown 5. Vehicle Make (specify): Applicable codes are found in y NASS Data Collection, Coding Editing Manual. (99) Unknown	(0) No alcohol present (1) Yes (alcohol present) (7) Not reported (8) No driver present (9) Unknown Note: See variables 37 through 55 (Page 4) for information on Oth 12. Alcohol Test Result For Driver Code actual value (decimal implied before first digit—0.xx) (95) Test refused (96) None given (97) AC test performed, results unknown (98) No driver present	00
6. Vehicle Model (specify): LX TAURUS Applicable codes are found in y NASS Data Collection, Coding Editing Manual. (999) Unknown	ACCIDENT RELATED 13. Speed Limit	280
7. Body Type Note: Applicable codes may be the back of this page.	found on 50 mph x 1.6093 = 80 kph 14. Attempted Avoidance Maneuver (01) No avoidance actions	99
Left justify; Slash zeros and lett No VIN—Code all zeros Unknown—Code all nines OFFICIAL RECOF 9. Police Reported Vehicle Disposi (0) Not towed due to vehicle da	(10) Accelerating (11) Accelerating and steering left (12) Accelerating and steering right (17) No driver present (18) Other action (specify):	
(1) Towed due to vehicle dama (9) Unknown 10. Police Reported Travel Speed Code to the nearest kph (NOTE: less than 0.5 kph) (160) 159.5 kph and above (999) Unknown	(99) Unknown 15. Accident Type Applicable codes may be found on the back of page two of this field form (CO) No impact Code the number of the diagram that best describes the accident circumstant (98) Other accident type (specify): (99) Unknown	<u>0</u> <u>2</u>

**** SKIP TO VARIABLE GV37 IF GV07 DOES NOT EQUAL 01-49 ****

	OCCUPANT RELATED	24. Rollover
4.0		(0) No rollover (no overturning)
16.	Driver Presence in Vehicle (0) Driver not present	
	(1) Driver present	Rollover (primarily about the longitudinal axis)
	(9) Unknown	(1) Rollover, 1 quarter turn only
		(2) Rollover, 2 quarter turns (3) Rollover, 3 quarter turns
17.	Number of Occupants This Vehicle	(4) Rollover, 4 or more quarter turns (specify):
	(00-96) Code actual number of occupants	
	for this vehicle (97) 97 or more	
	(99) Unknown	(5) Rollover-end-over-end (i.e., primarily
		about the lateral axis) (9) Rollover (overturn), details unknown
18.	Number of Occupant Forms Submitted	(3) NOIDVEL (OVERLINT), GELBIS CHANGET
		OVERRIDE/UNDERRIDE (THIS VEHICLE)
	VEHICLE WEIGHT ITEMS	^
19.	Vehicle Curb Weight	25. Front Override/Underride (this Vehicle)
	10 kilograms. (045) Less than 450 kilograms	26. Rear Override/Underride (this Vehicle)
	(610) 6,100 kilograms or more	(0) No override/underride, or
	(999) Unknown	not an end-to-end impact
	_3.160 lbs x .4536 = <u>1.433</u> kgs	
		Override (see specific CDC) (1) 1st CDC
	Source:	(2) 2nd CDC
		(3) Other not automated CDC (specify):
20.	Vehicle Cargo Weight	
-	10 kilograms.	Madagida (ana anasifia CDC)
	(000) Less than 5 kilograms (450) 4,500 kilograms or more	Underride (see specific CDC) (4) 1st CDC
ļ	(999) Unknown	(5) 2nd CDC
l		(6) Other not automated CDC (specify):
	lbs X .4536 = kgs	
	RECONSTRUCTION DATA	(7) Medium/heavy truck or bus override
21	Towed Trailing Unit	(9) Unknown
21.	(0) No towed unit	
	(1) Yes—towed trailing unit	HEADING ANGLE AT IMPACT FOR
	(9) Unknown	HIGHEST DELTA V
22	Documentation of Trajectory Data	Values: (000)-(359) Code actual value
	for This Vehicle	(997) Noncollision
	(0) No	(998) Impact with object
	(1) Yes	(999) Unknown
22	Post Collision Condition of Tree or Bala	27. Heading Angle For This Vehicle 998
۷۵.	Post Collision Condition of Tree or Pole (For Highest Delta V)	400
	(0) Not collision (for highest delta V) with	28. Heading Angle For Other Vehicle 998
	tree or pole -(1) Not damaged	
'	(2) Cracked/sheared	
	(3) Tilted <45 degrees (4) Tilted ≥45 degrees	
ŀ	(4) Tilted 245 degrees (5) Uprooted tree	
	(6) Separated pole from base	
	(7) Pole replaced (8) Other (specify):	
	·	
	(9) Unknown	

29. Basis for Total Delta V (highest) Delta V Calculated (1) CRASH program—damage only routine (2) CRASH program—damage and trajectory routine (3) Missing vehicle algorithm Delta V Not Calculated (4) At least one vehicle (which may be this vehicle) is beyond the scope of an acceptable reconstruction program, regardless of collision conditions. (5) All vehicles within scope (CDC applicable) of CRASH program but one of the collision conditions is beyond the scope of the CRASH program or other acceptable reconstruction technique, regardless of adequacy of damage data. (6) All vehicle and collision conditions are within scope of one of the acceptable reconstruction programs, but there is insufficient data available.	Highest 32. Lateral Component of Delta V
COMPUTER GENERATED DELTA V Highest 30. Total Delta V Nearest kph (highest) Nearest kph (secondary)	34. Confidence in Reconstruction Program Results (For Highest Delta V) (0) No reconstruction (1) Collision fits model — results appear reasonable (2) Collision fits model — results appear high (3) Collision fits model — results appear low (4) Borderline reconstruction — results appear reasonable
(NOTE: 000 means less than 0.5 kph) (160) 159.5 kph and above (999) Unknown	35. Type of Vehicle Inspection (0) No inspection (1) Complete inspection (2) Partial inspection (specify):
31. Longitudinal Component of + 9 99 Nearest kph (highest) Nearest kph (secondary) (NOTE:000 means greater than -0.5 kph and less than +0.5 kph) (±160) ±159.5 kph and above (999) Unknown	36. Is this an AOPS Vehicle? (0) No (1) Yes - researcher determined (2) VIN determined air bag system (3) VIN determined automatic (passive) belts (4) VIN determined air bag and automatic (passive) belts
IS OLDMISS APPLICABLE FOR T	THIS VEHICLE? [] YES [] NO

	USI VCCIONIC Sampang System Common amores of	100 0 7 0 100 100 100 100 100 100 100 10						
	Police Reported Other Drug Presence (0) No other drug(s) present (1) Yes [other drug(s) present]	DRUG EVALUATION CLASSIFICATION OTHER DRUGS TEST RESULTS FOR DRIVER DEC Specimen						
	(7) Not reported	Test Test						
	(8) No driver present	Results Results						
	(9) Unknown	Narcotic Drug 40. O 41 O						
	•	Depressant Drug 42. 0 43. 0						
38.	Police Reported Drug Evaluation Classification							
	(DEC) Test For Driver	Cannabinoid Drug 48. 0 49. 0						
	(0) No DEC process available or given	Phencyclidine (PCP) 50. O 51. O 52.						
	(1) DEC process given, results known	Inhalant Drug 52. <u>0</u> 53. <u>0</u>						
	(2) DEC process given, results unknown	Other Drug (Excluding 54 55						
	(3) DEC process available, unknown if given	Nicotine, Aspirin, Alcohol,						
	(8) No driver present	Drugs Administered Post-Crash)						
	_	Codes For DEC Test Results						
39.	Other Drug Specimen Test Type For Driver	(0) No DEC test given						
	(0) No specimen test given	(1) Passed DEC test						
	(1) Blood test	(2) Failed DEC test						
	(2) Urine test	(3) DEC test given—results unknown						
	(3) Other specimen tests (specify):	(8) No driver present						
		(9) Unknown if DEC test given						
	(7) Unspecified specimen test							
	(8) No driver present	Codes for Specimen Test Results						
	(9) Unknown if specimen test given	,						
	TO OTRIOVITI SPESIMON LOST SITEM	(0) No specimen test given						
		(1) Drug not found in specimen						
		(2) Drug found in specimen						
		(7) Specimen test given, results unknown or						
		not obtained						
		(8) No driver present						
		(9) Unknown if specimen test given						
	•							
	_	_						
		··•						

OTHER DATA	
OTHER DATA	61. Rollover Initiation Object Contacted
56. Driver's Zip Code	
(00000) Driver not present (00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99999) Unknown	62. Location on Vehicle Where Initial Principal Tripping Force Is Applied (0) No rollover (1) Wheels/tires
57. Driver's Race/Ethnic Origin (0) Driver not present (1) White (non-Hispanic) (2) Black (non-Hispanic) (3) White (Hispanic) (4) Black (Hispanic) (5) American Indian, Eskimo or Aleut (6) Asian or Pacific Islander (8) Other (specify):	(2) Side plane (3) End plane (4) Undercarriage (5) Other location on vehicle (specify): (8) Non-contact rollover forces (specify): (9) Unknown
(9) Unknown 58. Vehicle Special Use (This Trip) (0) No special use (1) Taxi (2) Vehicle used as school bus (3) Vehicle used as other bus (4) Military (5) Police (6) Ambulance	 (0) No rollover (1) Roll right - primarily about the longitudinal axis (2) Roll left - primarily about the longitudinal axis (5) End-over-end (i.e., primarily about the lateral axis) (9) Unknown roll direction
(7) Fire truck or car	PRECRASH DATA
(8) Other (specify):(9) Unknown	64. Pre-Event Movement (Prior to
ROLLOVER DATA	Recognition of Critical Event)
If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank. If GV24 (Rollover) = 0, then GV59-GV63 must equal 0. If GV24 = 9, then GV59-GV63 must equal 9. 59. Rollover Initiation Type (0) No rollover (1) Trip-over (2) Flip-over (3) Turn-over (4) Climb-over	 (01) Going straight (02) Slowing or stopping in traffic lane (03) Starting in traffic lane (04) Stopped in traffic lane (05) Passing or overtaking another vehicle (06) Disabled or parked in travel lane (07) Leaving a parking position (08) Entering a parking position (09) Turning right (10) Turning left (11) Making a U-turn (12) Backing up (other than for parking position)
 (5) Fall-over (6) Bounce-over (7) Collision with another vehicle (8) Other rollover initiation type specify): (9) Unknown rollover initiation type 	(13) Negotiating a curve (14) Changing lanes (15) Merging (16) Successful avoidance maneuver to a previous critical event (97) Other (specify):
60. Location of Rollover Initiation	(98) No driver present (99) Unknown
 (0) No rollover (1) On roadway (2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median (9) Unknown 	

PRECRASH DATA (Continued) Pedestrian or Pedalcyclist, or Other Nonmotorist 65. Critical Precrash Event (80) Pedestrian in roadway (81) Pedestrian approaching roadway This Vehicle Loss of Control Due To: (82) Pedestrian-unknown location (01) Blow out or flat tire (83) Pedalcyclist or other nonmotorist in roadway (02) Stalled engine (03) Disabling vehicle failure (e.g., wheel fell off) (specify): (84) Pedalcyclist or other nonmotorist approaching (specify): (04) Non-disabling vehicle problem (e.g., hood flew roadway (specify): (85) Pedalcyclist or other nonmotorist—unknown up) (specify): (05) Poor road conditions (puddle, pot hole, ice, etc.) location (specify): (specify): (06) Traveling too fast for conditions Object or Animal (87) Animal in roadway (08) Other cause of control loss (specify): (88) Animal approaching roadway (09) Unknown cause of control loss (89) Animal—unknown location (90) Object in roadway (91) Object approaching roadway This Vehicle Traveling (10) Over the lane line on left side of travel lane (92) Object—unknown location (11) Over the lane line on right side of travel lane (12) Off the edge of the road on the left side (98) Other critical precrash event (specify): (13) Off the edge of the road on the right side (99) Unknown (14) End departure (15) Turning left at intersection (16) Turning right at intersection (17) Crossing over (passing through) intersection For Corrective Actions Attempted see variable GV14 (19) Unknown travel direction (Attemped Avoidance Manuever) Other Motor Vehicle In Lane (50) Stopped 66. Precrash Stability After Avoidance Maneuver (51) Traveling in same direction with lower speed (0) No avoidance maneuver (i.e., lower steady speed or decelerating) (1) Tracking (52) Traveling in same direction with higher speed (2) Skidding longitudinally-rotation less than 30 (53) Traveling in opposite direction degrees (54) in crossover (3) Skidding laterally—clockwise rotation (55) Backing (4) Skidding laterally—counterclockwise rotation (59) Unknown travel direction of other motor vehicle (7) Other vehicle loss-of-control (specify): (8) No driver present Other Motor Vehicle Encroaching Into Lane (60) From adjacent lane (same direction)—over left (9) Precrash stability unknown lane line (61) From adjacent lane (same direction)—over right lane line 67. Precrash Directional Consequences of (62) From opposite direction—over left lane line Avoidance Maneuver (Corrective Action) (63) From opposite direction—over right lane line (O) No avoidance maneuver (64) From parking lane (1) Vehicle stayed in travel lane where avoidance (65) From crossing street, turning into same maneuver was initiated direction (2) Vehicle staved on roadway but left travel lane (66) From crossing street, across path where avoidance maneuver was initiated (67) From crossing street, turning into opposite (3) Vehicle stayed on roadway, not known if left travel lane where avoidance maneuver was (68) From crossing street, intended path not known initiated (70) From driveway, turning into same direction (71) From driveway, across pat 1 (4) Vehicle departed roadway (72) From driveway, turning into opposite direction (5) Avoidance maneuver initiated off roadway (73) From driveway, intended path not known (8) No driver present - (74) From entrance to limited access highway (9) Directional consequences unknown (78) Encroachment by other vehicle-details unknown *** IF THE CDS APPLICABLE VEHICLE WAS NOT INSPECTED (I.E., GV35=0), ***

DO NOT COMPLETE THE EXTERIOR AND INTERIOR VEHICLE FORMS.

*** IF GV07 DOES NOT EQUAL 01-49, DO NOT COMPLETE *** THE EXTERIOR VEHICLE, INTERIOR VEHICLE, OCCUPANT ASSESSMENT, AND OCCUPANT INJURY FORMS.



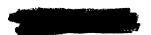
U.S. Department of Transportation

National Highy Administration	vey Treffic Selety		EX	CTERIOR	VEHI	CLE F	ORM	N.A			SAMPLING NESS DATA	
	ry Sampling Un Number - Strate		nber 9	41	$\frac{2}{8}$. Vehici	e Numb	er			0	
				VEHICLE	DENT	FICAT	ON					
VIN	FACT	2 5	53 4	14 N	4_				_	Model \	$e_{\text{ar}} \underline{9}$	2
Vehicle M	ake (specify):	1	CORT	>		Vehicle	Model (specify):	<u></u>	AUR	45	TX
<u>.</u>				L(CATO	R						
	e end of the dar amaged axle fo			ct to the vel	nicle lon	gitudina	l center	line or t	umper (corner f	or end in	npacts
	Impact No.			of Direct Da	amage			Lo	ocation	of Field	L	
	1	ACE		Front		n pel	U	shol	< f	RON	Dun	nper
												,
			CRU	SH PROFI	LE IN	CENTI	METER	S				
:	Identify the plar sill, etc.) and lal Measure and do	bel adj	ustments	(e.g., free s	pace).					bumpe	er, at sill,	, above
	Measure C1 to impacts.	C6 fro	m driver t	o passenger	side in	front or	rear im	pacts ar	nd rear t	o front	in side	
1	Free space valu the individual C side taper, etc.	locati	ons. This	may include	e the fol	lowing:	bumper	lead, b	umper t			
	Use as many lin	es/col	umns as n	ecessary to	describ	e each (damage	profile.				
Specific	Plane of Impa			Damage	Field							
Impact Number	C-Measureme	nts	Width (CDC)	Max Crush	Field L	C,	C ₂	C ₃	C.	C ₆	C ₆	±D
/	FRONT BUN		139	2.5	137	12	5	2.5	25	5	125	0
· · · · · · · · · · · · · · · · · · ·	FREE SPA	CE			ļ	11	4	1.5	1.5	4	11	
						1	/	1	1	1	1.5	
	EAD MOVE	MEN	7	1		5	5	5	5	5	5	-
-	FINAL	_				6	م)	6	م ا	4	6.5	
											<u> </u>	
						_						
					 			 				
							-					
		$\neg \uparrow$			†							
											1	

ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	106.	inches	x	2.54	=	<u> 2 6 9</u> cm
Overall Length	192.	inches	x	2.54	=	<u>488</u> cm
Maximum Width	_71.2	inches	x	2.54	=	_ <u>/ 8 /</u> cm
Curb Weight *	3084	pounds	x	.4536	=	<u>1, 3 9 9</u> kg
Average Track	_ Le 1.05	inches	x	2.54	=	
Front Overhang	<u>40.3</u>	inches	x	2.54	=	102 cm
Rear Overhang	_45.7	inches	x	2.54	=	
Undeformed End Width		inches	x	2.54	=	<u> 1 4 0 cm</u>
Engine Size: cyl./displ.				.001		, <u>3.0</u> L
		CID	x	.0164	=	L

6 possenger, 4-door seden, 4-speed automatic V6



L 2991

$$6L$$
 2997 +87 = 3084
 LX 3073 +87 = 3160

1,433

Vehicle was a 5-passenger 4-door, sedan

	VEHICLE DAMAGE CVETCH	· ugo L
	VEHICLE DAMAGE SKETCH	
TIRE—WHEEL DAMAGE a. Rotation physically b. Tire restricted deflated RF 2 RF 2 LF 2 RR 2 LR 2 LR 2 LR 2 LR 2	ORIGINAL SPECIFICATIONS Wheelbase	WHEEL STEER ANGLES (For locked front wheels or displaced rear axles only) RF ± o LF ± o RR ± o LR ± o Within ± 5 degrees DRIVE WHEELS FWD □ RWD □ 4WD
☐ Manual ☒ Automatic	Engine Size: cyl./displ3.0 L	Cargo Weightkg
Moderate word 155 undercarriage undercarriage ground ground	MEASUREMENTS IN CENTIMETERS SCROTTILITY JOHN MARINE CRICK JOHN MARINE JOHN MARINE	109 109 109 109 109 109 109 109 109 109
NOTES: Shatah anu ani	109 268	<u> 702</u>
•	h direct damage and single hatch induced damage on all views. An rass in tire bead, direction of striations, scuff on sidewalls, etc.). If page.	-

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

				Mir Mi	chigan		
	CONTRACTOR OF THE PROPERTY OF			0 4.1-	Tau	Factory List	Factory Del'd
Type of Body		Wheel	Total	Ship.	Tax H.P.	Price	Price
Pass. Cap.	Model	Base	Length	WŁ.	n.r.		
ORD Motor Co.,				Mich	igan 🕩		
1992 FESTIVA SERIES - FWI	D, 1.3 L, 4-C	yl (80.7°), EPFI G	as Engir	18		
3ore & Stroke 2.79" x 3.29"; Tax. H.P.	. 12.45; P.D. 80.	7 cu.in., 1.	3 Liter, 99H;	; Manual Ti	ansaxle (5/17/91) 6.041	7,236
4-Ps 2-dr. Hatchback, L Series T05			140.5" 140.5"	1,720 1,742	12.45 12.45	6,941 7,980	8,275
4-Ps 2-dr. Hatchback, GL Series Toptions Festiva: 3-Speed Automatic Top	ransaxie-\$515 f c	or GL: Cali	f. Emissions	System-\$7			
A63 for GL: Defroster, Rear Window-	\$170; Radio, Ele	ectronic AN	NFM Stereo	Cassette v	wDigital C	losk, L-\$467	7; GL-
155; Roof, Flip-Up Open Air-\$243; Sp	onts Option Pac	kage-\$366	for GL Moo	iel			
1992 MUSTANG SERIES RW	/D, 4-Cyl, 2.3	L (140	"), EPFI G	as Engi	ne		
Bore & Stroke, 3.78" x 3.12"; Tax. H.P	P. 22.9; P.D., 140	0 cu.in., 2.:	Litter, 5-Sp	d. Man. Tra	ins., 5/17/	9	
MUSTANG100.5" w.b., 5-Spd. M 4-Ps 2-dr. LX Sedan P40	anual Transmiss 66 (BA) HVS		179.6"	2.658	22.9	10,215	10,65
4-Ps 2-dr. LX Hatchback P41	61 (DA) HVS		179.6	2717	22.9	10,721	11,16
4-Ps 2-dr. LX Convertible P44	66 (BA) HVS		179.6	2,875	22.9	16,899	17,33
1992 MUSTANG SERIES RW	m sni va d	Svcl (30	2"\ FPFI	Gas Fn	aine		
Bore & Stroke, 4" x 3"; Tax. H.P. 51.2	: P.D. 302 cu.in.	, 5.0 Liter,	w.b. 100.5	5-Spd. Ma	in. Trans.,	5/17/91	
4-Ps 2-dr. LX Sedan P40	66 (BA) HVS	5 100.5	179.6	2,882	51.2	13,422	13,86
4-Ps 2-dr. LX Hatchback, P40	61 (DA) HVS		179.6	2914	51.2	14,207 19,644	14,64 20,08
4-Ps 2-dr. LX Convertible P44 MUSTANG GT Model RWD	66 (BA) B2L	100.5	179.6	3,103	51.2	13,044	20,00
4-Ps 2-dr. GT Hatchback P42	61 (DA) HVE	3 100.5"	179.6*	3,016	51.2	15,243	15,68
4-Ps 2-dr. GT Convertible P45 66	(BA) HVS (B2L	100.5	179.6	3,237	51.2	20,199	20,53
options Mustang: 4-Spd. Automatic O 523; Air Conditioning, Manual Contro	verdrive-\$595; (Calif. Emis	sions Syster	n-\$100; Le	ather Seat	bng Sunace	s - Sport
PROBE - 99.0" w.b., 99C/445	Ai	F 99.0°	177.0	2,622	18.39	12,257	12,58
4-Ps 2-dr. GT, H.B., Man. Tr. T20 PROBE - 99.0" w.b., 99L/445	~		177.0	2,022			. 2,00
4-Ps 2-dr. GT, H.B., Man. Tr. T20 PROBE - 99.0" w.b., 99U/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22			177.0°	2,892	18.37	14,857	
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1", Tax. H.P. 2	3.0L; V6 Cyl	x 99.0° (1 82°),	177.0° EPFI Gas	2,892	18.37	14,857	
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD,	3.0L; V6 Cyl	X 99.0° (182°), J.in.; 3.0 Li	177.0° EPFI Gas	2,892	18.37	14,857	15,18
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1", Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto	A: 3.0L; V6 Cyl 9.4; P.D. 182 cu A omatic-\$732; Ca	X 99.0° (182°), u.in.; 3.0 Li L 99.0° lif. Emissi	177.0° EPFI Gas ter 177.0° ons System	2,892 5 Eng. (9 2,862 -\$72; Leath	18.37 9U) 29.4 er Seating	13,257 Surfaces E	15,18 13,58 luckets-
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1", Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto 1523 for GT and LX; Air Conditioning,	A: 3.0L; V6 Cyl 9.4; P.D. 182 cu A omatic-\$732; Ca Manual, Model	X 99.0° (182°), u.in.; 3.0 Li L 99.0° lif. Emissi GL, withou	177.0° EPFI Gas ter 177.0° ons Systemat tinted glas	2,892 5 Eng. (9 2,862 -\$72; Leath s-\$937; Ali	18.37 9U) 29.4 er Seating other mod	13,257 Surfaces E dels \$817; A	15,18 13,58 Suckets- uir Condi
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1", Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto	A; 3.0L; V6 Cyl 29.4; P.D. 182 cu A omatic-\$732; Ca Manual, Model nti-Lock Brakes,	X 99.0° (182°), u.in.; 3.0 Li L 99.0° lif. Emissi GL, withou Models Li	177.0° EPFI Gas ter 177.0° ons System it tinted glas X & GT-\$59	2,892 2,862 \$72; Leath s-\$937; All	18.37 9U) 29.4 er Seating other modience Gro	13,257 Surfaces E dels \$817; A up II GL-\$1	15,18 13,58 luckets- uir Condi 88; LX au
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 3T-\$323; Power Door Locks, GL-\$210 485 for LX & GT; Radio, AM/FM Elec	A3.0L; V6 Cyl 19.4; P.D. 182 cu Appropriatic-\$732; Ca Manual, Model nti-Lock Brakes, 0; Power Driver stronic Cassette	X 99.0° (182°), u.in.; 3.0 Li L 99.0° lif. Emissi GL, without Models Li s Seat-\$30 with packs	177.0" EPFI Gas ter 177.0" ons System- t timted glas X & GT-\$59: 25 for LX & 0 ages 253A-1	2,892 5 Eng. (9 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; witho	18.37 9U) 29.4 er Seating other modience Gro Side Wind ut said par	13,257) Surfaces E dels \$817; A up II GL-\$1 lows & Dool ckages-\$10	13,58 luckets- ir Condi- 88; LX ar Locks- 90; Roof
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auti 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; Al 3T-\$323; Power Door Locks, GL-\$21 1485 for LX & GT; Radio, AWFM Elec Tip-Up Open Air-\$355; Speed control	A3.0L; V6 Cyl 19.4; P.D. 182 cu Appropriatic-\$732; Ca Manual, Model nti-Lock Brakes, 0; Power Driver stronic Cassette	X 99.0° (182°), u.in.; 3.0 Li L 99.0° lif. Emissi GL, without Models Li s Seat-\$30 with packs	177.0" EPFI Gas ter 177.0" ons System- t timted glas X & GT-\$59: 25 for LX & 0 ages 253A-1	2,892 5 Eng. (9 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; witho	18.37 9U) 29.4 er Seating other modience Gro Side Wind ut said par	13,257) Surfaces E dels \$817; A up II GL-\$1 lows & Dool ckages-\$10	13,58 luckets- ir Condi- 88; LX ar Locks- 90; Roof,
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 3T-\$323; Power Door Locks, GL-\$216 485 for LX & GT; Radio, AM/FM Elec Filip-Up Open Air-\$355; Speed control i313 for GL model	A3.0L; V6 Cyl 19.4; P.D. 182 cu 20.4; P.D. 182 c	X 99.0° (182°), J.in.; 3.0 Li L 99.0° lif. Emissi GL, without Models L s Seat-\$30 with pack aputer-\$21	177.0" EPFI Gas ter 177.0" ons System- ons Systems X & GT-\$59: 25 for LX & G ages 253A-\$ 5 for LX & G	2,892 5 Eng. (9' 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; without T; Wheels	18.37 9U) 29.4 er Seating other mod ience Gro Side Wind ut said pad , Aluminur	13,257 § Surfaces Edels \$817; Aup II GL-\$1 lows & Dool clages-\$10 m with BSW	13,58 luckets- ir Condi- 88; LX ar Locks- 90; Roof,
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 3T-\$323; Power Door Locks, GL-\$216 485 for LX & GT; Radio, AM/FM Elec Filip-Up Open Air-\$355; Speed control i313 for GL model 1992 TAURUS Series (FWD)	A3.0L; V6 Cyl 19.4; P.D. 182 cu 19.4; P.D. 182 c	X 99.0" (182"), .i.in.; 3.0 Li L 99.0" Liff. Emissis GL, without Models L s Seat-\$30 with packar uputer-\$21	177.0" EPFI Gas ter 177.0" ons System- st tinted glas X & GT-\$59 X for LX & 0 ages 253A-1 5 for LX & 0	2,892 5 Eng. (9' 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; without T; Wheels	18.37 9U) 29.4 er Seating other mod ience Gro Side Wind ut said pad , Aluminur	13,257 § Surfaces Edels \$817; Aup II GL-\$1 lows & Dool clages-\$10 m with BSW	13,58 luckets- ir Condi- 88; LX ar Locks- 90; Roof
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auti 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; Al 3T-\$323; Power Door Locks, GL-\$216 485 for LX & GT; Radio, AWFM Election of the Stroke 3.50" x 3.15", Tax. H.F. 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15", Tax. H.F.	A3.0L; V6 Cyl 9.4; P.D. 182 cu ornatic-\$732; Ca Manual, Model Mit-Lock Brakes, 0; Power Driver stronic Cassette 1-\$224; Trip Corr 3.0 L, V6 C 2.29.4; P.D., 18;	X 99.0° (182"), u.in.; 3.0 Li L 99.0° lif. Emissi GL, with pack s Seat-\$21 with pack rputer-\$21 yi (182") 2 cu.in.; 3.	177.0" EPFI Gas ter 177.0" ons System- st tinted glas X & GT-\$59 X for LX & 0 ages 253A-1 5 for LX & 0	2,892 5 Eng. (9' 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; without T; Wheels	18.37 9U) 29.4 er Seating other mod ience Gro Side Wind ut said pad , Aluminur	13,257 § Surfaces Edels \$817; Aup II GL-\$1 lows & Dool clages-\$10 m with BSW	13,58 luckets- ir Condi- 88; LX ar Locks- 90; Roof
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 3T-\$323; Power Door Locks, GL-\$216 485 for LX & GT; Radio, AM/FM Elec Filip-Up Open Air-\$355; Speed control i313 for GL model 1992 TAURUS Series (FWD)	A3.0L; V6 Cyl 9.4; P.D. 182 cu ornatic-\$732; Ca Manual, Model Mit-Lock Brakes, 0; Power Driver stronic Cassette 1-\$224; Trip Corr 3.0 L, V6 C 2.29.4; P.D., 18;	X 99.0° (182"), u.in.; 3.0 Li L 99.0° (16. Emissi GL, withou Models L: Sold (182") with packarputer-\$21 y1 (182") 2 cu.in.; 3. Trans.	177.0" EPFI Gaster 177.0" ons Systemat timed glass X & GT-\$59: 56 for LX & G ages 253A-1 5 for LX & G) SEFI Ga 0 Liter.	2,892 5 Eng. (9' 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; without T; Wheels	18.37 9U) 29.4 er Seating other mod ience Gro Side Wind ut said pad , Aluminur	13,257 § Surfaces Edels \$817; Aup II GL-\$1 lows & Dool clages-\$10 m with BSW	15,18 13,58 luckets- ir Condi- 88; LX ar Locks- 80; Roof, Tires-
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 5T-\$323; Power Door Locks, GL-\$210 485 for LX & GT; Radio, AWFM Elec Flip-Up Open Air-\$355; Speed control 3313 for GL model 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15"; Tax. H.F TAURUS FWO, w.b., 106.0"; 4-Sp 6-Ps 4-dr. L Sedan 6-Ps 4-dr. GL Sedan	3,0L; V6 Cyl 29.4; P.D. 182 cu Anomatic-\$732; Ca Manual, Model nti-Lock Brakes, 0; Power Driver stronic Cassette 1-\$224; Trip Corr 2, 29.4; P.D., 18; d. Auto w/O.D. P50 FC/HW P52 FC/HW	(182"), L. 99.0" L. 99.0" L. 99.0" GL, withou Models L s Seat-\$30 with pack riputer-\$21 y1 (182") 2 cu.ir.; 3. Trans. S. 106.0" D. 106.0"	177.0" EPFI Gas ter 177.0" ons System at tinted glas X & GT-\$59: 25 for LX & G ages 253A-\$ 5 for LX & G Utter. 192.0"	2,892 2,862 \$72; Leath \$-\$937; All 5; I Conver \$779; witho \$17; Wheels \$18 Engine 2,991 2,997	18.37 9U) 29.4 er Seating other motience Gro Side Wind ut said par Aluminur 8, 99U & 29.4 29.4	13,257 g Surfaces E dels \$817; A up II GL-\$1 lows & Door ckages-\$10 m with BSW L 99Y 14,960 15,280	13,58 luckets- ir Condi- 88; LX ai Locks- 90; Roof, Tires- 15,47
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1", Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000, A 3T-\$323; Power Door Locks, GL-\$21/485 for LX & GT; Radio, AWFM Elec Tip-Up Open Air-\$355; Speed control 3313 for GL model 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15"; Tax. H.F TAURUS FWD, w.b., 106.0"; 4-Sp 6-Ps 4-dr. L Sedan 6-Ps 4-dr. GL Sedan 6-Ps 4-dr. LX Sedan	3.0L; V6 Cyl 9.4; P.D. 182 cu 9.4; P.D. 182 cu 9.4; P.D. 182 cu 9.4; P.D. 182 cu 9.5; Power Driver 9.5	(182"), L 99.0" L 99.0" lif. Emissi GL, without s Seat-\$30 with packar puter-\$21 yl (182") yl (182") Trans. 5 106.0" D 106.0" B 106.0"	177.0" EPFI Gas ter 177.0" ons System- at tinted glas X & GT-\$59: 25 for LX & 0 ages 253A-1 5 for LX & 0 SEFI Ga 0 Liter. 192.0" 192.0"	2,892 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; witho 6T; Wheels 1s Engine 2,991 2,997 3,073	18.37 9U) 29.4 er Seating other mod ience Gro Side Wind ut said par Aluminur 9, 99U 8 29.4 29.4 29.4	13,257 g Surfaces E dels \$817; A up II GL-\$1: lows & Door ckages-\$10 m with BSW L 99Y 14,960 15,280 17,775	13,58 luckets- ir Condi- 88; LX ar Locks- 80; Roof, Tires- 15,47 15,77 18,26
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1", Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 3T-\$323; Power Door Locks, GL-\$216 485 for LX & GT; Radio, AM/FM Elec Filip-Up Open Air-\$355; Speed control i313 for GL model 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15", Tax. H.F TAURUS FWD, w.b., 106.0"; 4-Sp 6-Ps 4-dr. L Sedan 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. L Wagon	3.0L; V6 Cyl 9.4; P.D. 182 cu promatic-\$732; Ca Manual, Model nti-Lock Brakes, 0; Power Driver stronic Cassette -\$224; Trip Com 3.0 L, V6 C; 2.29.4; P.D., 18; dd. Auto wf0.D. P50 FC/HV P53 FC/HV P55 FF/HV	X 99.0" (182"),in.; 3.0 Li L 99.0" lif. Emissis GL, without Models L s Seat-\$30 with packa router-\$21 yi (182") 2 cu.in.; 3. Trans. S 106.0" B 106.0" S 106.0"	177.0" EPFI Gas ter 177.0" ons System- st timted glas X & GT-\$59: 25 for LX & G ages 253A-1 5 for LX & G Utter. 192.0" 192.0" 192.0" 193.1"	2,892 2,862 \$72; Leath s-\$937; All 5; I Convers 3T; Power 6709; witho 1T; Wheels s Engine 2,991 2,997 3,073 3,142	18.37 9U) 29.4 er Seating other modifience Gro Side Wind ut said par Aluminur 8, 99U 8 29.4 29.4 29.4	13,257 g Surfaces Edels \$817; A lows & Door clages-\$10 m with BSW 14,980 15,280 17,775 16,013	13,58 kuckets- ir Condi- 88; LX au- Locks- 80; Roof, Tires- 15,47 15,77 18,20 16,50
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1", Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000, A 3T-\$323; Power Door Locks, GL-\$21/485 for LX & GT; Radio, AWFM Elec Tip-Up Open Air-\$355; Speed control 3313 for GL model 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15"; Tax. H.F TAURUS FWD, w.b., 106.0"; 4-Sp 6-Ps 4-dr. L Sedan 6-Ps 4-dr. GL Sedan 6-Ps 4-dr. LX Sedan	3.0L; V6 Cyl 9.4; P.D. 182 cu 9.4; P.D. 182 cu 9.4; P.D. 182 cu 9.4; P.D. 182 cu 9.5; Power Driver 9.5	X 99.0" (182"), .iin.; 3.0 Li L 99.0" lif. Emissi GL, with pack puter-\$21 vii (182") 2 cu.in.; 3. Trans. S 106.0" D 106.0" S 106.0" D 106.0"	177.0" EPFI Gas ter 177.0" ons System at timted glas at timted glas at timted glas at GT-\$59 5 for LX & G ages 253A-1 5 for LX & G SEFI Ga 0 Liter 192.0" 192.0" 192.0" 193.1" 193.1"	2,892 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; witho 6T; Wheels 1s Engine 2,991 2,997 3,073	18.37 9U) 29.4 er Seating other mod ience Gro Side Wind ut said par Aluminur 9, 99U 8 29.4 29.4 29.4	13,257 g Surfaces E dels \$817; A up II GL-\$1: lows & Door ckages-\$10 m with BSW L 99Y 14,960 15,280 17,775	13,58 luckets- ir Condi- 88; LX ai- Locks- 80; Roof, Tires- 15,47 15,77 16,55 16,56
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 3T-\$323; Power Door Locks, GL-\$216 485 for LX & GT; Radio, AM/FM Elec Filip-Up Open Air-\$355; Speed control 3313 for GL model 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15"; Tax. H.F TAURUS FWD, w.b., 106.0"; 4-Sp 6-Ps 4-dr. L Sedan 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. LX Wagon 6-Ps 4-dr. GL Wagon 6-Ps 4-dr. GL Wagon 6-Ps 4-dr. LX Series FWD, Bore & Stroke, 3.50" x 3.15"; Tax. H.	A3.0L; V6 Cyl 9.4; P.D. 182 cu A Domatic-\$732; Ca Manual, Model nti-Lock Brakes, D; Power Driver stronic Cassette -\$224; Trip Corr 2.29.4; P.D., 18; d. Auto wto.D. P50 FC/HV P53 FC/HV P53 FC/HV P55 FF/HV P58 FF/HV	X 99.0" (182"), .iin.; 3.0 Li L 99.0" lif. Emissis GL, withouter-\$21 vii (182") 2 cu.in.; 3. Trans. S 106.0" D 106.0" S 106.0" D 106.0" I (182") 2 cu.in.; 3.	177.0" EPFI Gas ter 177.0" ons Systems x & GT.\$59.05 for LX & G ages 253A-1 5 for LX & G SEFI Ga 0 Liter. 192.0" 192.0" 192.1" 193.1" 193.1" , DOHC, \$ 0 Liter.	2,892 2,862 \$72; Leath s-\$937; All 5; I Conver 3T; Power 6709; witho 6T; Wheels 12,991 2,997 3,073 3,142 3,144 3,268	18.37 9U) 29.4 er Seating other modience Gro Side Windut said part, Aluminur 9, 99U 8 29.4 29.4 29.4 29.4 29.4	13,257 g Surfaces E dels \$817; A up II GL-\$1 lows & Dool ckages-\$10 m with BSW 4.99Y 14,960 15,280 17,775 16,013 16,290 19,464	13,58 luckets- ir Condi- 88; LX ai- Locks- 80; Roof, Tires- 15,47 15,77 16,55 16,56
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99L/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Dotions Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 3T-\$223; Power Door Locks, GL-\$210 6485 for LX & GT; Radio, AWFM Elec Filip-Up Open Air-\$355; Speed control 3313 for GL model 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15"; Tax. H.F. TAURUS FWD, w.b., 106.0"; 4-Sp 6-Ps 4-dr. L Sedan 6-Ps 4-dr. L Wagon 6-Ps 4-dr. GL Wagon 6-Ps 4-dr. GL Wagon 1992 TAURUS Series FWD, Bore & Stroke, 3.50" x 3.15"; Tax. H. TAURUS SHO, w.b., 106.0"; 5-Sp Bore & Stroke, 3.50" x 3.15"; Tax. H. TAURUS SHO, w.b., 106.0"; 5-Sp	A3.0L; V6 Cyl 9.4; P.D. 182 cu A Domatic-\$732; Ca Manual, Model Mit-Lock Brakes, 0; Power Driver ctronic Cassette 1\$224; Trip Com 9.3.0 L, V6 Cy 9.29.4; P.D., 18; d. Auto wf0.D. P55 FFAN P55 FFAN P55 FFAN P58 FFAN P58 FFAN P58 FFAN R58 FFAN R58 FFAN R58 FFAN R58 FFAN R59 FFAN R59 FFAN R50 CM R50	X 99.0" (182"), .iin.; 3.0 Li L 99.0" lif. Emissi GL, with pack puter-\$21 vii (182") 2 cu.in.; 3. Trans. S 106.0" D 106.0" S 106.0" D 106.0" B 106.0" I (182") 2 cu.in.; 3.	177.0" EPFI Gas ter 177.0" ons System at timted glas at timted glas 5 for LX & G ages 253A-1 5 for LX & G 192.0" 192.0" 192.0" 192.1" 193.1" 193.1" , DOHC, \$ 0 Litter ie	2,892 2,862 2,862 \$772; Leath 55; I Convert 6709; witho 617; Wheels 18 Engine 2,991 2,997 3,073 3,142 3,144 3,268 SEFI Gas	18.37 9U) 29.4 er Seating other mod other mod other mod other mod other mod at said para, Aluminur 29.4 29.4 29.4 29.4 29.4 29.4 29.4 29.	13,257 g Surfaces E dels \$817; A up II GL-\$1; lows & Dooi clages-\$10 n with BSW 14,980 15,280 17,775 16,013 16,290 19,464	13,58 kuckets- ir Condi- 88; LX an Locks- 80; Roof, Tires- 15,47 15,77 18,57 16,50 16,50 19,95
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Options Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 3T-\$323; Power Door Locks, GL-\$216 485 for LX & GT; Radio, AM/FM Elec Filip-Up Open Air-\$355; Speed control 3313 for GL model 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15"; Tax. H.F TAURUS FWD, w.b., 106.0"; 4-Sp 6-Ps 4-dr. L Sedan 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. LX Wagon 6-Ps 4-dr. GL Wagon 6-Ps 4-dr. GL Wagon 6-Ps 4-dr. LX Series FWD, Bore & Stroke, 3.50" x 3.15"; Tax. H.	3.0L; V6 Cyl 9.4; P.D. 182 cu Anomatic-\$732; Ca Manual, Model nti-Lock Brakes, 0; Power Driver stronic Cassette 1-\$224; Trip Con 9.3.0 L, V6 Cy 2.29.4; P.D., 18; dd. Auto w/O.D. P50 FC/HV P53 FC/HV P55 FF/HV P55 FF/HV P58 FF/HV P58 FF/HV P58 FF/HV P59.4; P.D. 18 dd. Manual Tmar P54 FC/HV	(182"), u.in.; 3.0 Li 99.0" (182"), u.in.; 3.0 Li 99.0" lif. Emissi GL, without St. s Sent-\$30 with packing uter-\$21 yi (182") 2 106.0" B	177.0" EPFI Gaster 177.0" ons Systemat tinted glas X & GT-\$59: D5 for LX & G SEFI Ga 0 Liter 192.0" 192.0" 193.1" 193.1" 193.1" , DOHC, \$ 0 Liter le 1920"	2,892 5 Eng. (9' 2,862 \$72; Leath 5; I Convent 3T; Power 1709; witho 6T; Wheels 18 Engine 2,991 2,997 3,073 3,144 3,268 SEFI Gast	18.37 9U) 29.4 er Seating other modience Gro Side Wind ut said part, Aluminur a, 99U 8 29.4 29.4 29.4 29.4 29.4 29.4 29.4 29.	13,257 g) Surfaces Edels \$817; A sup II GL-\$1: lows & Door clages-\$10 m with BSW 14,980 15,280 17,775 16,013 16,290 19,464 999Y	13,58 luckets- ir Condi- 88; LX ar Locks- 80; Roof, Tires- 15,47 15,77 18,26 16,50 16,50 19,90
PROBE - 99.0" w.b., 99L/445 4-Ps. 2-dr. GT, H.B., Man. Tr. T22 1992 PROBE Series - FWD, Bore & Stroke 3.5" x 3.1"; Tax. H.P. 2 PROBE - 99.0" w.b., 99U/445 4-Ps 2-dr. LX H.B., Man. Tr. T21 Detions Probe: 4-Spd., Overdrive Auto 523 for GT and LX; Air Conditioning, ioning, Electronic, LX & GT-\$1000; A 6T-\$323; Power Door Locks, GL-\$21(6485 for LX & GT; Radio, AWFM Bec 78ip-Up Open Air-\$355; Speed control 313 for GL model 1992 TAURUS Series (FWD) Bore & Stroke 3.50" x 3.15"; Tax. H.F TAURUS FWD, w.b., 106.0"; 4-Sp 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. LX Sedan 6-Ps 4-dr. LX Segon 6-Ps 4-dr. LWagon 6-Ps 4-dr. LWagon 6-Ps 4-dr. Sel. Wagon	3.0L; V6 Cyl 9.4; P.D. 182 cr Anomatic-\$732; Ca Manual, Model nti-Lock Brakes, 0; Power Driver stronic Cassette -\$224; Trip Con 13.0 L, V6 Ci 2.29.4; P.D., 18; d. Auto wO.D. P50 FC/HV P53 FC/HV P53 FC/HV P55 FF/HV P55 FF/HV S.0 L, V6 Cy P.29.4; P.D. 18; d. Manual Tma P54 FC/HV ing, for GL & LX control, LX Mode	X 99.0" (182"), .i.in.; 3.0 Li L 99.0" lif. Emissi Models L s Seat-\$30 with packs uputer-\$21 y/l (182") D 106.0" B 106.0" B 106.0" B 106.0" C 106.0"	177.0" EPFI Gas ter 177.0" ons System- at timted glas X & GT-\$59: 25 for LX & G ages 253A-1 5 for LX & G 192.0" 192.0" 193.1" 193.1" 193.1" , DOHC, 0 Liter if Emissions ti-Lock Brai	2,892 2,862 \$72; Leath s-\$937; All 5; I Conversor; Power 6709; witho 617; Wheels 12,991 2,997 3,073 3,142 3,144 3,268 SEFI Gas 3,189 s System-\$ sing System	18.37 9U) 29.4 er Seating other modience Gro Side Windut said part, Aluminur 29.4 29.4 29.4 29.4 29.4 29.4 29.4 29.	13,257 Surfaces E dels \$817; A up If GL-\$1: lows & Door ckages-\$10 m with BSW 4.99Y 14,980 15,280 17,775 16,013 16,290 19,464 99Y 23,839 lag Passeng udio Digital	15,18 13,58 kuckets- ir Condi- 88; LX ar Locks- 80; Roof Tires- 15,41 15,77 18,22 16,57 19,96 24,3; ger-\$488

	•		CDC	WORKSHEE	ET .			raye
			CODES FOR	OBJECT CON	TACTED			<u> </u>
(01-30)	- Vehicle Nun	nber		157) Fence			
10.00,	VCIIIOIC IVOII			•) Wali			
Noncolli	ision			•) Building			
	Overturn — rol	liover			Ditch or			
·	Fire or explosion			•	Ground			
	Jackknife		÷) Fire hyd	rant		
	Other intraunit	damage (spe	cify):) Curb			
			••		Bridge			
(35)	Noncollision in	jury				xed object (specify):	
(38)	Other noncollis	ion (specify):				•	•	
				(69)	Unknow	n fixed obje	ect	
(39)	Noncollision -	details unknown	own			•		
				Collisi	on with No	onfixed Obje	ect	
Collision	n With Fixed Ob	ject		(71)) Motor v	ehicle not in	n-transport	
(41)	Tree (≤ 10 cm	in diameter)) Pedestri			
	Tree (> 10 cm) Cyclist (
	Shrubbery or b	ush		(74)	Other no	onmotorist (or conveyan	ce
(44)	Embankment							
				(75)	Vehicle	occupant		
(45)	Breakaway pol	e or post (any	/ diameter)	• • • •) Animal			
				(77)) Train			
Nonbrea	akaway Pole or	Post		(78)	Trailer,	disconnecte	d in transpo	ort
	Pole or post (≤						nicle in-trans	
(51)	Pole or post (> diameter)	• 10 cm but :	≤ 30 cm in	(88)	Other n	onfixed obje	ect (specify):	:
(52)	Pole or post (>	30 cm in dia	ameter)	(89)	Unknow	n nonfixed	object	
(53)	Pole or post (di	iameter unkno	own)				-	
				(98)	Other e	vent (specif	y):	
(54)	Concrete traffic	c barrier						
	Impact attenua			(99)	Unknow	n event or	object	
(56)	Other traffic ba	arrier (include:	s guardrail)					
	(specify):	·						
	T- 101-20-1201 - 271	DEFORM	ATION CLASS	SIFICATION BY	'EVENT N	IUMBER		
Accident		(1) (2)			(4) Specific	(5) Specific	(6)	
Event		Direction	Incremental	(3) L	ongitudinal	Vertical or	Type of	(7)
Sequence	Object	of Force	Value of	Deformation	or Lateral	Lateral	Damage	Deformation
Number	Contacted	(degrees)	Shift	Location	Location	Location	Distribution	
01	<u> </u>				7		1.)	^ 1

		DEFORMA	TION CLASS	SIFICATION I	BY EVENT N	UMBER		
Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation Location	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
01	56			F	D	E	$\overline{\omega}$	01
02	43			R	7	$\underline{\mathcal{E}}$	5	01
03	41			L	<u>Z</u>	M	5	01
04	61			<u>U</u>	F	<u>_D</u>	$\underline{\omega}$	02
						-		
				-		-		
								

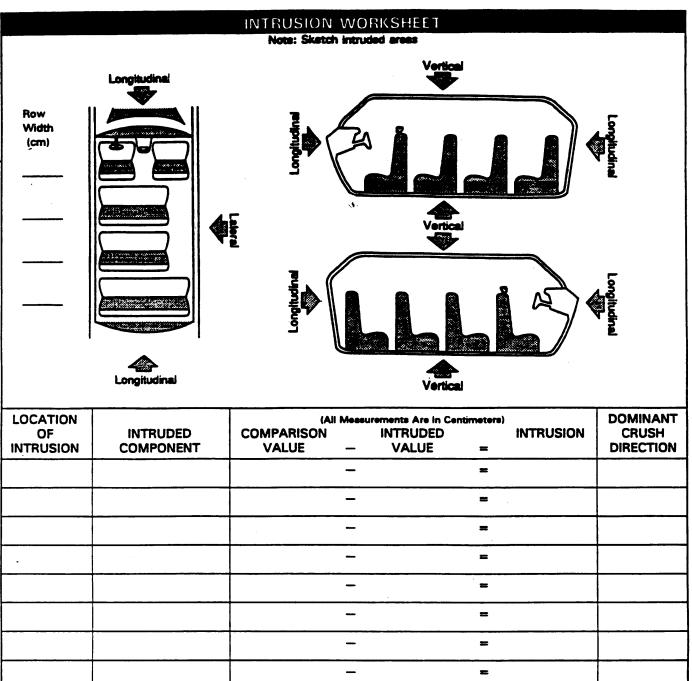
	C	OLLISIO	N DEFORMA	TION CLAS	SIFICATIO	N				
HIGHEST [DELTA "V"					•				
Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent			
4.04	5. <u>6</u> /	6. 12	7. <u>U</u>	8. <u> </u>	9. 🔼	10. س	11.02			
Second Hig	Second Highest Delta "V"									
12. <u>0</u>	13. <u>56</u>	14/	15. <u>F</u>	16	17. <u>E</u>	18. <u>W</u>	19. 0 /			
		CRU	SH PROFILE	IN CENTIM	ETERS					
	The crush prot in the appre	file for the d opriate spac	amage described e below. (ALL N	d in the CDC(s)	above should IS ARE IN CEN	be document	ed			
HIGHEST I	DELTA "V"						•			
20. 	21. 				C ₆	C ₆	22. ±D			
							+ 			
Second Hi	ghest Delta "V	•								
23. 	24. 	C ₂			C ₆	C _e	25. 			
140	006	006	006	006	<u> </u>	<u>07</u> .	<u>-000</u>			
but Not										
					inches X 2	.54 =	centimeters			

Γ			
	Is This A Multi-Stage Manufactured Vehicle And/Or A Certified Altered Vehicle? (0) No post manufacturer modifications (1) Yes - post manufacturer modifications (specify): (Include photograph of CERTIFICATION PLACARD in case report) (9) Unknown if vehicle is modified Fire Occurrence (0) No fire Yes, fire occurred (1) Minor (2) Major (9) Unknown	0	34. Fuel Tank-1 Location (0) No fuel tank (1) Aft of center of the rear wheels (rear axle) centered (2) Aft of center of the rear wheels (rear axle) left side (3) Aft of center of the rear wheels (rear axle) right side (4) Forward of center of the rear wheels (rear axle) centered (5) Forward of center of the rear wheels (rear axle) left side (6) Forward of center of the rear wheels (rear axle) right side (7) Over center of the rear wheels (rear axle) (8) Other (specify):
	Origin of Fire (0) No fire (1) Vehicle exterior (front, side, back, top) (2) Exhaust system (3) Fuel tank (and other fuel retention system parts) (4) Engine compartment (5) Cargo/trunk compartment (6) Instrument panel (7) Passenger compartment area (8) Other location (specify): (9) Unknown	<u></u>	(9) Unknown 36. Fuel Tank-1 Filler Cap Location 37. Fuel Tank-2 Filler Cap Location (0) No fuel tank (1) On back plane (2) Aft of center of the rear wheels (rear axle) on left side plane (3) Aft of center of the rear wheels (rear axle) on right side plane (4) Forward of center of the rear wheels (rear axle) on left side plane (5) Forward of center of the rear wheels (rear axle) on right side plane (6) Over the center of the rear wheels (rear axle) on left side plane (7) Over the center of the rear wheels (rear axle)
33.	Type of Fuel Tank-2 (0) No fuel tank (electrical vehicle) (1) Metallic (2) Non-metallic (9) Unknown	<u>o</u>	on right side plane (8) Other (specify): (9) Unknown 38. Fuel Tank-1 Damage 39. Fuel Tank-2 Damage (0) No fuel tank (1) No damage to fuel tank (2) Deformed, no seam failure (3) Deformed, with a seam failure (4) Punctured (5) Lacerated (ripped) (6) Abraded (scraped) (7) Filler neck separation from the fuel tank (8) Other damage (specify): (9) Unknown

Natio	onal Accident Sampling System-Crashworthin	1622 DEC	a System:	Extenor Venicle Form	rage o
40.	Location of Fuel System-1 Leakage	1_		his Vehicle Equipped With More Than Fuel Tanks?	0
41.	Location of Fuel System-2 Leakage	<u> </u>	-	No (one or two tanks only)	
	(0) No fuel tank (1) No fuel leakage		Yes	- More Than Two Tanks	
	•		(1)	Yes no damage to any tank or filler	
_	Primary Area Of Leakage (2) Tank		(2)	cap and <u>no fuel system leakage</u> Yes <u>no damage</u> to any tank or filler	1
	(3) Filler neck		\-'	cap but there is fuel system leakage	
	(4) Cap			(specify leakage location):	
	(5) Lines/pump/filter(6) Vent/emission recovery		(3)	Yes damage to an additional tank or	
	(8) Other (specify):		(3)	filler cap and there is fuel system leaka	<u>ae</u>
	(9) Unknown			(specify the following):	
	(9) Onknown		İ	Type of tank	
		_ 1		Filler cap location	
42.	Fuel Type-1	2		Tank damage	
43.	Fuel Type-2	00	}	Location of leakage Type of fuel	
			(9)	Unknown if more than two tanks	
	Single Fuel Type (00) No fuel tank				
	(01) Gasoline				
	(02) Diesel			COMMENTS	
	(03) CNG (Compressed Natural Gas) (04) LPG (Liquid Petroleum Gas) also				
	known as Propane				
•	(05) LNG (Liquid Natural Gas)				
	(06) Methanol (M100 or M85) (07) Ethanol (E100 or E85)				
	(08) Other (Hydrogen or others) (specify):				
			<u> </u>	A 1 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Electric Powered or Electric/Solar				
	Powered Vehicles				
	(10) Lead Acid Battery (11) Nickel-Iron Battery				
	(12) Nickel-Cadmium Battery				
	(13) Sodium Metal Chloride Battery				
	(14) Sodium Sulfur Battery (18) Other (Specify):			·····	
	(10) Other (opeciny).				
	(98) Other Hybrid (specify):				
	(99) Unknown fuel type			•	
	•				
_ "-					
_					
**	* STOP: IF THE CDS APPLICABLE VEH	IICLF W	AS NO	TOWED AND WAS NOT AN ACE	S ***
	(I.E., GV09=0 OR 9 AND GV36=0), I				
	, 3735 - 3 311 3 AND 3730 - 01, 1		. CONF	LETE THE INTERIOR VEHICLE FOR	uvt.

U.S. Department of Transportation

Istional Highway Traffic Safety	INTERIOR VE	HICLE FURIN CRASHWORTHINGS DATA SYSTEM
Administration) ()	GLAZING
1. Primary Sampling Unit Number	$\frac{10}{2}$	Glazing Damage from Impact Forces
2. Case Number - Stratum	9418	15. WS <u>O</u> 16. LF <u>O</u> 17. RF <u>O</u> 18. LR <u>O</u> 19. RR <u>O</u>
3. Vehicle Number	01	20. BL O 21. Roof 822. Other O
INTEGRITY		(0) No glazing damage from impact forces
	• •	(2) Glazing in place and cracked from impact forces
4. Passenger Compartment Integrity (00) No integrity loss	00	(3) Glazing in place and holed from impact forces (4) Glazing out-of-place (cracked or not) and not holed from impact forces
Yes, Integrity Was Lost Through		(5) Glazing out-of-place and holed from impact forces
(01) Windshield		(6) Glazing disintegrated from impact forces
(O2) Door (side) (O3) Door/hatch (back door)		(7) Glazing removed prior to accident (8) No glazing
(O4) Roof		(9) Unknown if demaged
(O5) Roof glass		
(06) Side window		Glazing Damage from Occupant Contact
(07) Rear window (backlight)		Glazing Damage from Occupant Contact
(08) Roof and roof glass (09) Windshield and door (side)		23. WS 2 24. LF 25. RF 2 26. LR 2 27. RR
(10) Windshield and roof	j	
(11) Side and rear window (side window	end becklight)	28. BL
(12) Windshield and side window		(0) No occupant contact to glazing or no glazing
(13) Door and side window		(1) Glazing contacted by occupant but no glazing damage
(98) Other combination of above (specify) :	(2) Glazing in place and cracked by occupant contact
(99) Unknown		(3) Glazing in place and holed by occupant contact
(33) CIRIOWII		(4) Glazing out-of-place (cracked or not) by occupant
		contact and not holed by occupant contact (5) Glazing out-of-place by occupant contact and holed by
		occupent contact
Door, Tailgate or Hatch Opening		(6) Glazing disintegrated by occupant contact
5. LF 6. RF 7. LR 8. RR	9. TG/H	(9) Unknown if contected by occupant
(O) No door/gate/hatch		If No Glazing Damage <i>And</i> No Occupant Contact or No Glazing, Then Code IV31 Through IV46 As Ø
(1) Door/gate/hatch remained closed and	l operational	Glazing, Their code from through the s
(2) Door/gete/hatch came open during co		
(3) Door/gate/hatch jammed shut		Type of Window/Windshield Glazing
(8) Other (specify):		31. WS 0 32. LF 0 33. RF 0 34. LR 0 35. RR 0
(9) Unknown		36. BL 37. Roof 38. Other
•		40) No stanion content and so demand as demand
Damage/Failure Associated with Door	Tailanta or Hatch	(0) No glazing contact and no damage, or no glazing (1) AS-1 — Laminated
Opening in Collision. If IV05-IV09 ≠	2 Then code 0	(2) AS-2 — Tempered
		(3) AS-3 — Tempered-tinted
10. LF <u>0</u> 11. RF <u>0</u> 12. LR <u>0</u> 13. R	IR <u> </u>	(4) AS-14 — Gless/Plastic (8) Other (specify):
(0) No door/gete/hetch or door not open	ed	(9) Unknown
Door, Tailgate or Hatch Came Open Durit	ng Collision	
(1) Door operational (no damage)		Window Precrash Glazing Status
(2) Latch/striker failure due to damage		•
(3) Hinge failure due to damage (4) Door structure failure due to damage	•	39. WS <u>O</u> 40. LF <u>O</u> 41. RF <u>O</u> 42. LR <u>O</u> 43. RR <u>O</u>
(5) Door support (i.e., piller, sill, roof sid		44. BL_ <u></u> 45. Roof <u></u> 46. Other <u></u>
(6) Latch/striker and hinge failure due to	demage	(0) No glazing contact and no damage, or no glazing
(8) Other failure (specify):		(1) Fixed (2) Closed
(9) Unknown		(3) Partially opened
		(4) Fully opened
		(9) Unknown



	a Academ Ge				EA INTRUSION
					LA INTRUSION
Note	e: If no intrusion	ns, leave varis	ibles IV47-I\	/86 blank.	INTRUDING COMPONENT Interior Components
	Location of	Intruding	Magnitude		(01) Steering assembly
	Intrusion	Component			(02) Instrument panel left
					(03) Instrument panel center
					(04) Instrument panel right
1st	47	48.	49.	50.	(05) Toe pan
					(06) A (A1/A2)-pillar
				-	(07) B-pillar
					(08) C-pillar
2nd	51	. 52	53	54	(09) D-pillar
					(10) Door panel (side)
					(12) Roof (or convertible top) (13) Roof side rail
3rd	55	56.	57 .	58.	(13) Noor side rail (14) Windshield
					(15) Windshield header
					(16) Window frame
					(17) Floor pan (includes sill)
4th	59	60	61	62	(18) Backlight header
					(19) Front seat back
					(20) Second seat back
5th	63.	64.	65.	66.	(21) Third seat back
•	··			· · · · · · · · · · · · · · · · · · ·	(22) Fourth seat back
					(23) Fifth seat back
					(24) Seat cushion
6th	67	68	69	70	(25) Back door/panel (e.g., tailgate) (26) Other interior component (specify):
					(20) Other interior component (specify):
					(27) Side panel - forward of the A (A2)-pillar
7th	71	72	73	74.	(28) Side panel - rear of the A (A2)-pillar
	<i>-</i> · · · — —	· '		/ 	
					Exterior Components
					(30) Hood
8th	75	76	77	78	(31) Outside surface of this vehicle (specify):
					(22) Other autories shirts in the
					(32) Other exterior object in the environment
Qth	79	80	Ω1	82	(specify):(33) Unknown exterior object
Jui	· · ·		_ ''	JZ	(97) Catastrophic
					(98) Intrusion of unlisted component(s)
					(specify):
Oth	8 3	84	85	86	(99) Unknown
OCA	TION OF INTR	USION			MAGNITUDE OF INTRUSION
_	_	_	_		(1) ≥ 3 centimeters but < 8 centimeters
	ont Seat	Fourth			(2) ≥ 8 centimeters but < 15 centimeters
	(11) Left (12) Middle		Left Middle		(3) ≥ 15 centimeters but < 30 centimeters
	(12) Middle (13) Right				(4) ≥ 30 centimeters but < 46 centimeters
,	(13) NIGHT	(43)	Right		(5) ≥ 46 centimeters but < 61 centimeters
Se	cond Seat	(97)	Catastroph	ic	(6) ≥ 61 centimeters
	(21) Left		Other encl		(7) Catastrophic
	(22) Middle	,,	area (speci		(9) Unknown
	(23) Right		•		
_		(99)	Unknown		DOMINANT CRUCH DIDECTION
	ird Seat				DOMINANT CRUSH DIRECTION (1) Vertical
	(31) Left				(1) Vertical (2) Longitudinal
	(32) Middle				(3) Lateral
1	(33) Right				(7) Catastrophic
	•				(9) Unknown

	(AB	Messurements Are in Centimet	HO)	
COMPARISON VALUE		DAMAGE VALUE	=	DEFORMATION
151/2		12 1/2 CM	8 -	3
·				
	-		8	
	· <u>-</u>		*	
		5 notch do	own c	on tilt

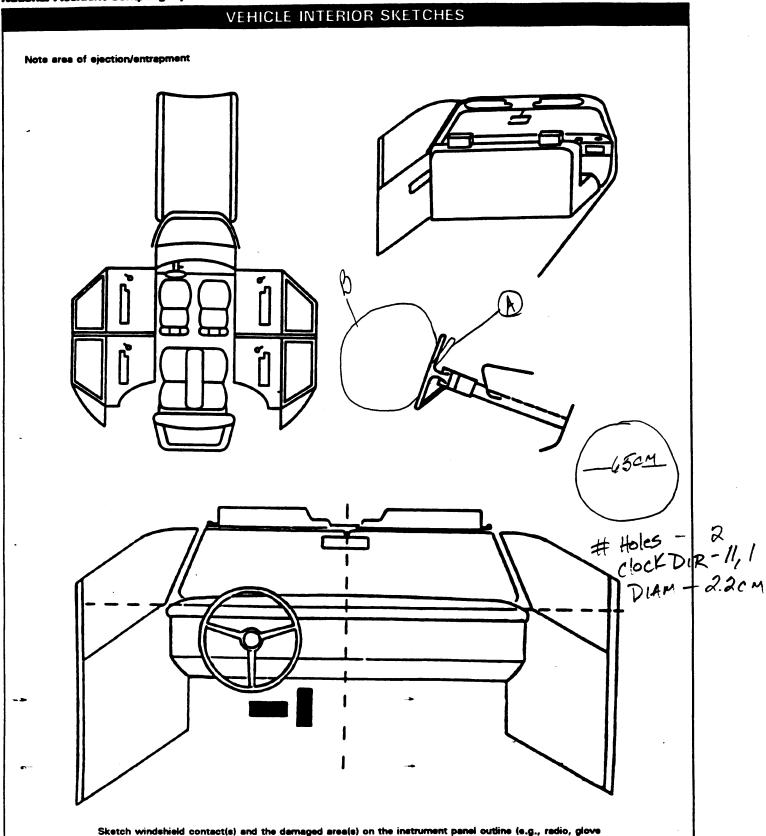
•

STEERING COLUMN	93. Location of Steering Rim/Spoke 0 5
87. Steering Column Type (1) Fixed column	Deformation (00) No steering rim deformation
(2) Tilt column (3) Telescoping column	Quarter Sections (01) Section A
(4) Tilt and telescoping column	(02) Section B DYB
(8) Other column type (specify):	(03) Section C (04) Section D
(9) Unknown	Half Sections
	(05) Upper half of rim/spoke (06) Lower half of rim/spoke (07) Left half of rim/spoke (08) Right half of rim/spoke
88. Blank <u>X X</u>	(09) Complete steering wheel collapse
(This variable is left blank so that numbering consistency can be maintained with the	(10) Undetermined location (99) Unknown
1988-94 CDS.	
	INSTRUMENT PANEL
89. Blank XXX	94. Odometer Reading <u>O 6 3</u> ,000
(This variable is left blank so that numbering consistency	kilometers—Code to the
can be maintained with the 1988-94 CDS.	nearest 1,000 kilometers (000) No odometer
1900-54 CD3.	(001) Less than 1,500 kilometers (500) 499,500 kilometers or more
	(999) Unknown
90. Blank XXX	20017
(This variable is left blank so that numbering consistency	_38 567 miles x 1.0083 = _102 068 dameters
can be maintained with the 1988-94 CDS.	Source:
10000 1 0001	
	95. Instrument Panel Damage from Occupant Contact?
91. Blank (This variable is left blank	(O) No
so that numbering consistency	(1) Yes (9) Unknown
can be maintained with the 1988-94 CDS.	
	96. Knee Bolsters Deformed from
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Occupant Contact?
92. Steering Rim/Spoke Deformation Code actual measured	(1) Yes (8) Not present
deformation to the nearest centimeter	(9) Unknown
(00) No steering rim deformation (01-14) Actual measured value in centimeters	
(15) 15 centimeters or more (98) Observed deformation cannot be measured	97. Did Glove Compartment Door Open During Collision(s)?
(99) Unknown	(O) No
	(1) Yes (8) Not present
	(9) Unknown

compartment, damage to instrument panel structure.

Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.

Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.



	·	ron	413 (CUPANT CONTAC			
Contact	Interior Component Contacted	Occupant No. If Known	R	Body egion If nown	Supporting Ph	ysical E	vidence	Confidence Level of Contact Point
A	04	1	F	ACE	Bent			
В	45			ACE	Blood			/
С	, ,	<u> </u>		710-				
D			+-					
E		,, , , , , , , , , , , , , , , , , , ,	+-					
<u>_</u>			+					
<u>_</u>			_					
			+					
<u>н</u>								
<u> </u>								
J	<u> </u>						····	
K								
L								
M								
N			-					
(05) Stee	risor ring wheel rim ring wheel hub/spo ring wheel (combin			Left side to	window glass or frame window glass including ore of the following: ndow sill, A (A1/A2)-pillar,	(48) (49)	Other interior obje	
of co	ring wheel (combin odes 04 and 05) ring column, transfector lever, other att	nission	(27)	B-piller, o	r roof side rail. side object (specify):	ROOF (50)	Front header	
	on equipment (e.g.	, CB, tape	(28)	Left side	window sill	(51) (52)	Rear header Roof left side rail	
	instrument panel a	nd below	RIGHT			(53)	· · · · · · · ·	
	er instrument pane t instrument panel :		(30)	•	interior surface, hardware or armrests	(54)	Roof or convertib	le top
	e compartment doc			Right side	hardware or armrest	FLOOR		
(13) Knee	bolster			•	A1/A2)-piller	(56) (57)	Floor (including to	
of th	dshield including on ne following: front f .1/A2)-pillar, instrur	neader,		Right B-pi Other righ	nt piller (specify):	(67)	transmission leve	
side (15) Wind	or, or steering asset only) dehield including on	e or more		Right side	window glass or frame window glass including ore of the following:		Parking brake har Foot controls incl brake	
A (A	ne following: front h .1/A2)-pillar, instrun or (passenger side c	nent panel, or	(37)	B pillar, o	Indow sill, A (A1/A2)-pillar, Ir roof side rail. Int side object (specify):	REAR (60)	•	
(16) Drive	er side air bag com ar	partment	(38)	Right side	window sill	(61) (62)	Backlight storage Other rear object	
(17) Pass	enger side air bag					,,		· • • • • • • • • • • • • • • • • • • •
	partment cover dshield reinforced b	v exterior	INTERIO	OR Seat, bac	:k support			
obje	ct (specify): er front object (spec	·	(41)	Beit restr	aint webbing/buckle aint B-pillar		CONFIDENCE LI	
		·	(43)	Other res	traint system component			
LEFT SIDE (20) Left	side interior surfac	۵.	(44)	(specify):	traint system	ł	(1) Certain (2) Probab	
excl	uding hardware or a side hardware or a	ermrests		Air bag (use codes "16" and "17"		(3) Possibl	•

compartment covers)

(21) Left side hardware or armrest

(22) Left A (A1/A2)-piller

AUTOMATIC RESTRAINTS NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form. AIR BAGS Right Left Availability/Function R **Deployment Failure** Air Bag System Availability/Function Air Beg System Deployment Are There Indications of Air Beg System Febure? (O) Not equipped/not available (0) Not equipped/not evailable (1) Air bag deployed during accident (O) Not equipped/not available (1) Air bag (as a result of impact) (1) No (2) Yes (specify): (2) Air bag deployed inadvertently just Non-functional prior to accident (2) Air bag disconnected (specify): (9) Unknown (3) Air bag deployed, accident sequence (3) Air bag not reinstalled undetermined (4) Nondeployed (9) Unknown (5) Unknown if deployed (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (9) Unknown AUTOMATIC BELTS Right Left Availability/Function F Use R Type S **Proper Use** Failure Modes Proper Use of Automatic (Passive) Belt Automatic (Passive) Belt Failure Modes Automatic (Passive) Belt System Availability/Function System **During Accident** (0) Not equipped/not available (0) Not equipped/not available/not used (O) Not equipped/not available/not in use (1) Automatic belt used properly (1) No automatic belt failure(s) (1) 2 point automatic belts (2) 3 point automatic belts (2) Automatic belt used properly with Torn webbing (stretched webbing not (2) (3) Automatic belts - type unknown child safety seat included) (3) Broken buckle or latchplate Upper anchorage separated Non-functional Autometic Belt Used Improperly (4) Automatic belts destroyed or (3) Automatic shoulder belt worn under (5) Other anchorage separated (specify): arm rendered inoperative (9) Unknown (4) Automatic shoulder belt worn behind (6) Broken retractor (7) Combination of above (specify): back (8) Other automatic belt failure (specify): utomatic (Passive) Belt System Use (5) Automatic belt worn around more (0) Not equipped/not available/destroyed than one person or rendered inoperative (6) Lap portion of automatic belt worn (9) Unknown (1) Automatic belt in use on abdomen (2) Automatic belt not in use (manually (7) Automatic lap and shoulder belt or disconnected, motorized track automatic shoulder belt used inoperative) improperly (3) Automatic belt use unknown with child safety seat (specify): (9) Unknown (8) Other improper use of automatic belt Automatic (Passive) Belt System Type (0) Not equipped/not available (specify): (1) Non-motorized system (9) Unknown (2) Motorized system (9) Unknown

MANUAL RESTRAINTS

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Ocupant Assessment Form.

If a Child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.

		Left	Center	Right
E	Availability	4	0	4.
โ	Evidence of usage	0.4.		64
R	Used in this crash?	04		6
S	Proper Use	1		0
'	Failure Modes			
s	Availability	4.	3	4,
Ē	Evidence of usage	04	0	84
Č	Used in this crash?	0	0	0
020	Proper Use			
D	Failure Modes			
0	Availability			
Ť	Evidence of usage			
Ĥ	Used in this crash?			
E	Proper Use			
R	Failure Modes			

Manual	(Active)	Rait System	Availability

- (O) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available type unknown

Integral Belt Partially Destroyed

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify):
- (9) Unknown

Manual (Active) Belt System Use

- (00) None used, not available, or belt
- removed/destroyed
- (O1) Inoperable (specify):
- (02) Shoulder belt
- (03) Lap belt
- Lap and shoulder belt
- (05) Belt used type unknown (08) Other belt used (specify):
- (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat
- Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat -
- type unknown (18) Other belt used with child safety seat
- (specify): (99) Unknown if belt used

Proper Use of Manual (Active) Belts

- (0) None used or not available (1) Belt used properly
- (2) Belt used properly with child safety seat

Belt Used Improperty

- (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat
- (5) Belt worn around more than one person
- (6) Lap belt worn on abdomen
- (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):
- (8) Other improper use of manual belt system (specify):
- (9) Unknown

Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
 (7) Combination of above (specify):
- (8) Other manual belt failure (specify):
- (9) Unknown

CHILD SAFETY SEAT FIELD ASSESSMENT						
When a child safety seat is present enter the occupant's number in the first row and complete the column below the occupant's number using the codes listed below. Complete a column for each child safety seat present.						
Occupant Number						
1. Type of Child Safety Seat						
Child Safety Seat Orientation					·	
Child Safety Seat Harness Usage						
Child Safety Seat Shield Usage						
5. Child Safety Seat Tether Usage						
6. Child Safety Seat Make/Model		Specify Bo	elow for E	ach Child Safe	ety Seat	
1. Type of Child Safety Seat		3.	Child Sa	fety Seat Harn	ess Usage	
(0) No child safety seat (1) Infant seat		4.	Child Sa	fety Seat Shie	ld Usage	
(2) Toddler seat		-	01:14 0-	for Cont Toth	11	
(3) Convertible seat		5.		fety Seat Teth otions Below A		ariables 3-5
(4) Booster seat			•			anabios 0 0.
(7) Other type child safety	seat (specify):		(OO) NO	child safety s	eat	
(8) Unknown child safety seat type (9) Unknown if child safety seat used 2. Child Safety Seat Orientation		Not Designed with Harness/Shield/Tether (01) After market harness/shield/tether added, not used				
		(02) After market harness/shield/tet (03) Child safety seat used, but no				
(00) No child safety seat				mess/shield/te		aitoi illaikot
Designed for Rear Facing for This Age/Weight (01) Rear facing				known if harne ded or used	ess/shield/teth	er
(02) Forward facing				d With Harnes		r
(08) Other orientation (spec	cify):		(11) Ha	rness/shield/te	ther not used	
(09) Unknown orientation				rness/shield/te known if harn		er used
Designed for Forward Facing Age/Weight	g for This		(21) Ha	n If Designed rness/shield/te	ther not used	
(11) Rear facing (12) Forward facing			,,	rness/shield/te known if harn		er used
- (18) Other orientation (spec	cify):		-			
(19) Unknown orientation			(99) Un	known if child	safety seat u	sed
Malana Basi Bi	ine For Th'	6.		fety Seat Mak		
Unknown Design or Orienta —Age/Weight, or Unknown A			(Specify	make/model a	ina occupant (numb er)
(21) Rear facing				· ···		
(22) Forward facing (28) Other orientation (spec	cify):					
(29) Unknown orientation						
(99) Unknown if child safe	ty seat used					

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
F I R S T	Head Restraint Type/Damage	3	0	3
	Seat Type	02		02
	Seat Performance			1
	Seat Orientation			1
SECOZD	Head Restraint Type/Damage	6	0	0
	Seat Type	03	03	03
	Seat Performance	1)	1
	Seat Orientation	1	l	1
TH-RD	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
OT HER	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			

Head Restraint Type/Damage by Occupant at This Occupant Position

- No head restraints
- (1)
- Integral no damage Integral damaged during accident (2)
- (3)
- Adjustable no damage Adjustable damaged during accident (4)
- (5)
- Add-on no damage Add-on damaged during accident (6)
- Other Specify):
- (9) Unknown

Seat Type (this Occupant Position)

- (00) Occupant not seated or no seat (01) Bucket
- (02) Bucket with folding back
- (03) Bench (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- (08) Pedestal (i.e., column supported)
- (09) Other seat type (specify):
- (10) Box mounted seat (i.e., van type)
- (99) Unknown

Seat Performance (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed specify:
- (4) Seat tracks/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion (specify):
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown

Seat Orientation (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) Forward facing seat
- (2) Rear facing seat
- (3) Side facing seat (inward)
- (4) Side facing seat (outward)
- (8) Other (specify):
- (9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT **CONTACT PATTERN**)

EJECTION/ENTRAPMENT DATA				
Complete the following if the researcher has any indication that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occupant Assessment Form.				
EJECTION No [2] Yes [] Describe indications of ejection and body parts involved in partial ejection(s):				
Occupant Number				
Ejection				
(Note on Vehicle Interior Sketch) Ejection Area				
Ejection Medium				
- Medium Status				
Ejection (1) Complete ejection (2) Partial ejection (3) Ejection, Unknown degree (9) Unknown	(7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	(5) Integral structure (8) Other medium (specify): (9) Unknown Medium Status (Immediately Prior to Impact) (1) Open (2) Closed (3) Integral structure (9) Unknown		
Ejection Area (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear	Ejection Medium (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):			
ENTRAPMENT No Yes Describe entrapment mechanism:	·[] -			
Component(s):				
(Note in vehicle interior diagram)				

Appendix F:

NASS CDS INTERVIEW FORM:

CASE VEHICLE DRIVER



U.S. Department of Transportation

National Highway Traffic Safety Administration

INTERVIEW FORM (A)

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 1	Interviewee(s) Role or Name(s): DIZI VER OF	
2. Case Number - Stratum 9 4 1 8	COSE VEhicle.	
3. Vehicle Number		
Review all available information and interview questions prior to conducting interview(s) to ensure the acquisition of all pertinent data.		
If the driver was not the person interviewed, was an appointment made for a follow-up interview?		
DRIVER'S DESCRIPTION OF ACCIDENT EVENTS		
CAn't Rem	rember Anything About	
Accident	/ 0	
OCCUPANT'S DESC	CRIPTION OF ACCIDENT EVENTS	
Glasses 62 contact	s - contacts very nd Kids up from Privers ED.	
VEH. FamiliARity -	yery	
ROADWAY " -	very	
Going to ply GRA.	nd Kids up from PRIVERS ED.	
C/955.	,	
•		

ACCID	ENT	DIAG	RAM



The use of this diagram is optional. It may serve to aid in relating interviewee accident trajectory data (i.e., pre-impact to FRP orientations) to identifiable objects in the environment.

NORTH



U.S. Department of Transportation

National Highway Traffic Safety Administration

INTERVIEW FORM (B)

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 10 2. Case Number - Stratum 9418	Interviewee(s) Role or Name(s): DRIVER
3. Vehicle Number	
ACCIDEN	IT DATA QUESTIONS
1. Can you tell me in which direction you were trav [X] North [] South [] East [] West (Optional - Where were you coming from or going)	[] Braking with lock-up
2. In which lane were you traveling? (Note: Lane 1 is designated as the right curb land) [1] [2] [3] [4] [] Other (specify):	
3. Can you remember your <u>estimated travel speed</u> (in per hour) before the accident? [] Stopped [] 1-10 [] 10-20 [] 20-30 [] 30-40 [] 40-50 [] 50-60 [] 60-70 [] 70+	7. Where was your vehicle at the time of the collision? [] Original travel lane [] Different travel lane [] In intersection
4. Just before the accident, can you tell me what you intending to do or were doing? Going straight	[] Higher [] Unknown 8a. Can you estimate your speed at the time of the collision?
5. Did you experience any loss of control due to w conditions or mechanical problems? [] No [] Yes (If yes, describe below)	how your vehicle moved to its stopped position?
6. Did you have to take any avoidance actions prior accident? [] No - Go to question 7 [] Yes - Go to question 6a	10. Can you tell me how many collisions your vehicle had during the accident and the source of the collisions?

National Accident Sampling System-Crashworthiness Dat	a System: Interview Form (B) Page 2
1. Primary Sampling Unit Number	3. Vehicle Number
2. Case Number - Stratum 9418	4. Occupant Number
VEHICLE/DRIVER I	DATA QUESTIONS
1. Can you tell me the year, make, model of your vehicle? 1 9 9 2, FORD, TAURUS Weeke Model 2. Can you describe the damage to your vehicle? FRONT END	7b. Were any of the belts removed or not functional prior to the accident? No Yes (If "Yes", specify which belt and describe problem)
3. Was there any previous damage to your vehicle that is not related to this accident? No [] Yes (If "yes", describe below)	8. Do any of the front belts move along a motorized track when the door is opened or closed? No (If "No", go to question 9) Yes (If "Yes", what seat location?) Right Front
4. Did any of the doors (hatch, tailgate) open during the accident? 《 No [] Yes (If "Yes", describe below)	8a. Were the motorized belts working properly before the accident? [] No (If "No", describe condition below)
5. Did any of the windows break during the accident? [] Yes (If "Yes", describe below)	8b. Were the belts connected to the track prior to the accident? [] No [] Yes [] Unknown
6. Does your vehicle have a glove compartment? [] No [Yes	9. Do any of the front "seat" belts attach to the door such that when the door is opened the belt travels with the door? No (go to question 10)
6a. Did the glove compartment door come open during the accident? [] No [] Yes [] Unknown 7. Does your vehicle have "seat belts"? [] No (If "No", go to question 7b) [] Yes (If "Yes", go to question 7a)	9a. Does this belt come across the? [] Chest only [] Lap and chest 9b. Was this belt connected prior to the accident? [] No [] Yes [] Unknown
7a. Can you describe the type of seat belt for each seat? Driver's seat [] Lap [AIR BAGS 10. Is your vehicle equipped with a driver's side air bag? [† No (go to question 11) [] Unknown (go to question 11) 10a. Did the air bag inflate during the accident? [] No (go to questions 10b and 10c)
	(go to question 10e)

National Accident Sampling System-Crashworthiness Date	System: Interview Form (B) Page 4
1. Primary Sampling Unit Number	3. Vehicle Number
2. Case Number - Stratum 9418	4. Occupant Number/
VEHICLE/DRIVER DATA O	UESTIONS (CONTINUED)
12h. Were any of these items added after you owned the child safety seat? [] Yes	OPTIONAL If you do not know where the vehicle is or if the owner's permission is needed for inspection. 15. Do you know where the vehicle is currently located?
3700	

National Accident Sampling System-Crashworthiness Date	
	ehicle Number
	ccupant Number
VEHICLE ROLLOVE	R/FIRE QUESTIONS
ROLLOVER QUESTIONS	FIRE QUESTIONS
1. Did the vehicle rollover during the accident? No (If "No", go to question 2.) Yes Unknown (skip to question 2) 1a. Describe where the rollover began. On roadway On shoulder On roadside or median Unknown 1b. What caused the vehicle to rollover? Other vehicle (specify vehicle number): Other cause (specify): Unknown 1c. Describe which direction the vehicle rolled. Toward the right Toward the left End-over-end Unknown 1d. Estimate the number of sides (including the top and bottom) which contacted the ground during the rollover? 1 side 2 sides 3 sides 1 sides Unknown 1e. Did the vehicle roll over more than one complete turn (more than 4 sides)? No (If "No", go to question 1g.) Yes	2. Did the vehice experience a fire?
1f. Estimate the number of complete turns. [] No [] Yes (specify): [] Unknown	COMMENTS ON ROLLOVERS AND FIRES
1g. When the venicle stopped rolling over, which side of the vehicle was in contact with the ground? [] Left side [] Right side [] Top [] Wheels [] Unknown	

etional Accident Sampling System-Crashworthiness Data System: Interview Form (B) Page 6					
1. Primary Sampling Unit Number	3. Vehicle Number				
2. Case Number - Stratum. 9418	4. Occupant Number				
OCCUPANT DATA QUESTIONS					
1. Was there anyone else in your vehicle at the time of the accident? No (If "No", go to question 4) Yes (If "Yes", specify number in question 2 below and then go to question 3) Unknown	5d. Were you (Was he/she)				
2. How many? [1] One other person [2] Two other persons [3] Three other persons [4] Four other persons [5] Five other persons [6] Six other persons [7] Seven or more other persons (specify number:) 3. Where was this person sitting? (Circle seating positions)	6. Were you (Was he/she) or any part of your (his/her) body thrown from the vehicle during the accident? ↓☑ No (If "No", go to question 7) [] Yes (If "Yes", go to question 6a) [] Unknown 6a. Can you remember out of what area of the vehicle you were (he/she was) thrown? [] No [] Yes (Describe:)				
[12] [13] [21] [22] [23] [31] [32] [33] [] Other (specify:)	7. Were you (Was he/she) wearing a seat belt just before the accident? [] No (If "No", go to question 8)				
OCCUPANT CHARACTERISTICS	Yes				
4. Can I have your (his/her) height, weight, age, and sex? Height 56 Weight 110 Age 62 Sex: [] Male [X] Female OCCUPANT POSTURE	7a. Were you (Was he/she) wearing the [] Lap belt? [] Shoulder belt? [] Shoulder belt? 7b. Can you describe how you were (he/she was) wearing the lap belt? [] Across the stomach				
5. Can you tell me how you (he/she was) were sitting in your vehicle?	[] Low on lap [] Other (specify:)				
5a. Can you describe the location of your (his/her) feet just prior to the collision? UNK	7c. Can you describe how you were (he/she was) wearing the shoulder belt? Over the shoulder Under the arm Behind the back Behind the seat Other (specify:) 7d. Did any part of the belt system break or tear?				
5b. Can you describe the location of your (his/her) arms? Both hands on	[A] No [] Yes (If "Yes", describe) [] Unknown				
the wheel					
5c. Was your (his/her) back resting against the seat back rest? [No (If "No", describe the position) [] Yes [] Unknown	8. Were you (Was he/she) trapped in the vehicle? [] No [] Yes (If "Yes", describe) Unknown Unconscious				

National Accident Sampling System-Crashworthiness Data System: Interview Form (B)

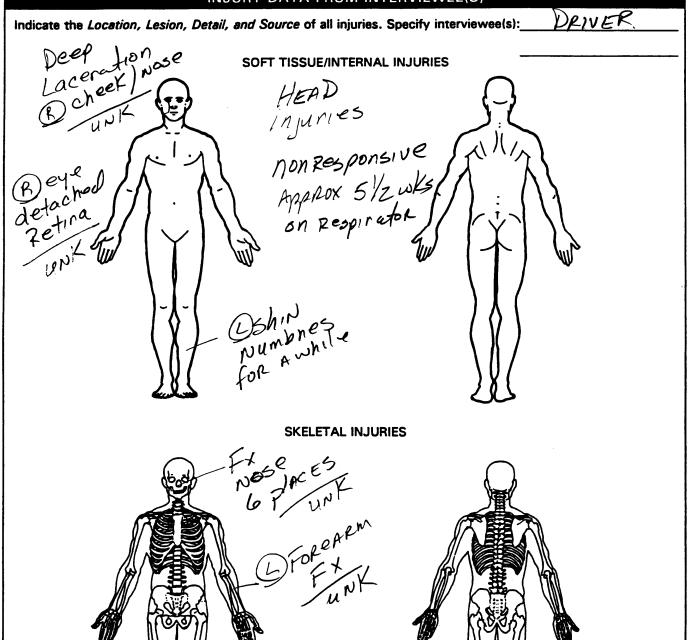
PSU Number

Case Number—Stratum 9418

Vehicle Number 0 /

Occupant Number 0 /





The space provided on the back of this page may be used to document injuries noted by the interviewee(s).

Primary Sampling Unit Number	3. Vehicle Number
Case Number - Stratum 9418	4. Occupant Number
OCCUPANT INJURY	DATA QUESTIONS
. Were you (Was he/she) injured? [] No (If "No", skip to question 7) [△ Yes (If "Yes", complete Occupant Injury Questions) [] Unknown 2. Did you (he/she) receive any cuts, abrasions, or bruises? [] No (go to question 3) [☐ Yes (If "Yes", record the exact location(s) and size on the manikin(s).)	 5a. Do you know what caused this injury? No Yes (If "Yes", specify the component(s) on the manikin(s).) Unknown 6. Did you (he/she) suffer any joint sprains or muscle strains?
[] Unknown a. Do you know what caused your (his/her) injury(s)? [] No [] Yes (If "Yes", specify the component(s) or object(s) on the manikin(s).) [Unknown	[≺ No (If "No", go to question 7) [] Yes (If "Yes", specify on the manikin(s), and there go to question 6a.) [] Unknown 6a. Do you know what caused the injury(s)? [] No [] Yes (If "Yes", specify the component(s) on the manikin(s).
3. Did you (he/she) experience any broken bones? [] No (If "No", go to question 4) [☒ Yes (If "Yes", record the exact location(s) and type of fracture(s) on the manikin(s), and then go to question 3a.) [] Unknown	manikin(s).) [] Unknown 7. Did you (he/she) receive any treatment? [] No (If "No", go to question 8) Yes (If "Yes", go to question 7a or return to question 2.)
a. Do you know what caused the injury(s)? [] No [] Yes (If "Yes", specify the component(s) or object(s) on the manikin(s).) [X] Unknown	7a. Were you (Was he/she) treated by (check all that apply): [] Hospital/trauma center? (specify hospital name)
3. Did you (he/she) injure your (his/her) head? (skull/brain?) [] No (If "No", go to question 5) **() Yes (If "Yes", describe the type of injury(s) on the manikin(s), then go to question 4a.) [] Unknown	 [] Medical clinic [] Out patient surgery? (specify medical facility:) [] Paramedics or first aid at the scene? [] A doctor in his/her office? [] Treated at home? [] None of the above, go to question 8.
a. Do you know what caused the injury(s)? [] No [] Yes (If "Yes", specify the component(s) on the manikin(s).) [] Unknown	7b. Were you (Was he/she) treated and released from the emergency room? []*No (If "No", go to question 7c.) [] Yes (If "Yes", go to question 7e.)
5. Were any of your (his/her) internal organs injured? No (If "No", go to question 6) [] Yes (If "Yes", thoroughly describe the type of injury(s) and specify the internal organ(s) injured on the manikin(s), and then go to question 5a.) [] Unknown	7c. 'Were you (Was he/she) hospitalized? [] No (If "No", give an explanation) [Yes (If "Yes", go to question 7d.)
pot out for IMR VISITE	7d. How many days were you (was he/she) in the hospital days St.C. Floor Linga

Primary Sampling Unit Number $\underline{\hspace{1cm}} \underline{\hspace{1cm}} \hspace{1$	3. Vehicle Number	01
Case Number - Stratum 9418	4. Occupant Number	01
OCCUPANT INJURY DATA	QUESTIONS (CONTINUED)	
Case rumber - Suatom		from work or school to the sch

_

Appendix G:

NASS CDS OCCUPANT ASSESSMENT FORM: CASE VEHICLE DRIVER



U.S. Department of Transportation

OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM

nel Highway Traffic Safety

dministration	GRAENWORTHINESS DAYA SYSTEM
1. Primary Sampling Unit Number /	OCCUPANT'S SEATING
2. Case Number - Stratum 9 4 18	10. Occupant's Seat Position/ _/
3. Vehicle Number	(11) Left side (12) Middle
4. Occupant Number	(13) Right side (14) Other (specify):
OCCUPANT'S CHARACTERISTICS	(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant
6. Occupant's Sex (1) Male (2) Female (9) Unknown	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown U inches X 2.54 = 167 centimeters	Fourth Seat (41) Left side (42) Middle (43) Right side (44) Other (specify): (45) On or in the lap of another occupant (97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999)Unknown	11. Occupant's Posture (0) Normal posture Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

		;	EJECTION/E	NTRAPMENT
12.	(1) Co (2) Pa (3) Eje	on o ejection omplete ejection artial ejection ection, unknown degree oknown	0	15. Medium Status (Immediately Prior To Impact) O (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13.	(Ó) No (1) Wi (2) Le (3) Riq (4) Le (5) Riq (6) Re (7) Ro (8) Ot	ght rear ear	etc.)	(NOTE: Entrapped means that part of the person was in the vehicle and mechanically restrained; jammed doors and immobilizing injuries by themselves are not sufficient to constitute entrapment.) (0) Not entrapped (1) Entrapped (9) Unknown
14.	(0) No (1) Do (2) No (3) Fix (4) No (5) Int (8) Ot	on Medium o ejection oor/hatch/tailgate onfixed roof structure xed glazing onfixed glazing (specify): tegral structure ther medium (specify):	<u>o</u>	

RESTRAINT SYSTEM EVALUATION				
17. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed	21. Air Bag System Availability/Function (O) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled			
(6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify): (9) Unknown 18. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	(9) Unknown 22. Air Bag System Deployment (0) Not equipped/not available (1) Air bag deployed during accident (as a result of impact) (2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, accident sequence undetermined (4) Nondeployed (5) Unknown if deployed (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (9) Unknown			
(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used 19. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat	23. Are There Indications of Air Bag System Failure? (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown Note: See Variables 44 through 48 (Page 5) for Information on Automatic Belts			
Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify):	24. Police Reported Restraint Use (0) None used (1) Police did not indicate restraint use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Other or automatic restraint (specify): (8) Restrained, type unknown (9) Police indicated "unknown"			
20. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify):				

		HEAD RESTRA	AIN I AN	D SEAT	EVALUATION
25.	at Th (0) (1) (2) (3) (4) (5) (6) (8)	Restraint Type/Damage by Occupant his Occupant Position No head restraints Integral—no damage Integral—damaged during accident Adjustable—no damage Adjustable—damaged during accident Add-on—no damage Add-on—damaged during accident Other (specify):	3	(0) (1) (2) (3) (4) (5)	at Performance (this Occupant Position) Occupant not seated or no seat No seat performance failure(s) Seat adjusters failed Seat back folding locks or "seat back" failed (specify): Seat track/anchors failed Deformed by impact of occupant Deformed by passenger compartment intrusion (specify):
	(9)	Unknown		(7)	Combination of above (specify):
26.		Type (this Occupant Position)	02	(8)	Other (specify):
	(01) (02) (03) (04) (05) (06) (07) (08)	Occupant not seated or no seat Bucket Bucket with folding back Bench Bench with separate back cushions Bench with folding back(s) Split bench with separate back cushion Split bench with folding back(s) Pedestal (i.e., column supported) Other seat type (specify):	ons	(3)	Unknown
		Box mounted seat (i.e., van type) Unknown			
					,
					,

	CHILD SA	FETY SEAT
28.	Child Safety Seat Make/Model (000) No child safety seat Applicable codes are found in your NASS CDS Data Collection, Coding and Editing (950) Built-in child safety seat	31. Child Safety Seat Harness Usage 32. Child Safety Seat Shield Usage
	(997) Other make/model (specify): (998) Unknown make/model (999) Unknown if child safety seat used	33. Child Safety Seat Tether Usage Note: Options below applicable to Variables OA31-OA33. (00) No child safety seat
29.	Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used	Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used
30.	Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation (99) Unknown if child safety seat used	Unknown if Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

	INJURY CONSEQUENCES	38. Working Days Lost 6 /
34.	Injury Severity (Police Rating)	Code the number of days (up through 60) that the occupant
	(0) O - No injury	lost from work due to the accident (00) No working days lost
	(1) C - Possible injury (2) B - Nonincapacitating injury	(61) 61 days or more
	(2) B - Nonincapacitating injury (3) A - Incapacitating injury	(62) Fatally injured
	(4) K - Killed	(97) Not working prior to accident
	(5) U - Injury, severity unknown	(99) Unknown
	(6) Died prior to accident	
	(9) Unknown	STOP - GO TO VARIABLE 44 ON PAGE 7
	2	VARIABLES 39 THROUGH 43 ARE
35.	Treatment - Mortality 3	COMPLETED BY THE ZONE CENTER
	(0) No treatment	
	(1) Fatal (2) Fatal - ruled disease (specify):	١ ١
	(2) Fatal - ruled disease (specify):	39. Time to Death Code number of hours from time of
		accident to time of death up through 24
	Nonfatal	hours. If time of death is greater than 24
	(3) Hospitalization	hours, code number of days. (Note: 1 day =
	(4) Transported and released	31, 2 days = 32, n days = 30 +n up
	(5) Treatment at scene - nontransported (6) Treatment later	through 30 days = 60)
	(8) Treatment - other (specify):	(00) Not fatal (96) Fatal - ruled disease
		(99) Unknown
	(9) Unknown	(65, 5
		10 1 10 10 10 10 10 10 10 10 10 10 10 10
36.	Type Of Medical Facility (for Initial Treatment)	40. 1st Medically Reported Cause of Death <u>O</u>
	(0) Not treated at a medical facility	41. 2nd Medically Reported Cause of Death
	(1) Trauma center	
	(2) Hospital (3) Medical clinic	42. 3rd Medically Reported Cause of Death O
	(4) Physician's office	Code the Occupant Injury from line number(s) for the medically reported
	(5) Treatment later at medical facility	injury(s) which reportedly contributed to
	(8) Other (specify):	this occupant's death
	(0) 11-1-2	(00) Not fatal or no additional causes
	(9) Unknown	(96) Mode of death given but specific
	1 /	injuries are not linked to cause of death. (specify):
37.	Hospital Stay	or death. (specify).
	(00) Not Hospitalized	(97) Other result (includes fatal ruled
	Code the number of days (up through 60) that the occupant stayed in hospital.	disease) (specify):
	(61) 61 days or more	(OO) Helicone
	(99) Unknown	(99) Unknown
	16 primary case	
	16 primary care 102 Rehabilitation	43. Number of Recorded Injuries for / 9
1	102 Kehabililalion	This Occupant /9 Code the actual analysis
		/
		(00) No recorded injuries
		(97) Injured, details unknown
		(99) Unknown if injured
		-
	•	

	AUTOMATIC BELT SYSTEM		48.	Automatic (Passive) Belt Failure Modes				
	Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown) (0		During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):				
4 5.	Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown	<u>)</u>	49.	Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):				
46.	Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown	0		Check the Primary Source Used In Determining Belt				
47.	Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown	<u>ර</u>		Use. [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify):				
	ARE ALL APPLICABLE MEDICAL RECORDS INCLUDED NO [] YES [
	UPDATE CANDIDA	TE?		NO [/] YES []				

-	OR EXAMINATED BOTUPONICUES ARE			BELT USE DETERMINATION
e e	OP - VARIABLES 50 THROUGH 53 ARE MPLETED BY THE ZONE CENTER TRAUMA DATA	53.	(O) (1)	or rendered inoperative Vehicle inspection
50.	Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured		(2) (3) (8) (9)	Official injury data Driver/occupant interview Other (specify): W. These Statement Unknown if belt used
51.	Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given			
52.	Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of theHCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured			

Appendix H:

NASS CDS OCCUPANT INJURY FORM: CASE VEHICLE DRIVER

Administration

U.S. Department of Transportation National Highway Traffic Safety

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

3. Vehicle Number

2. Case Number - Stratum

4. Occupant Number

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

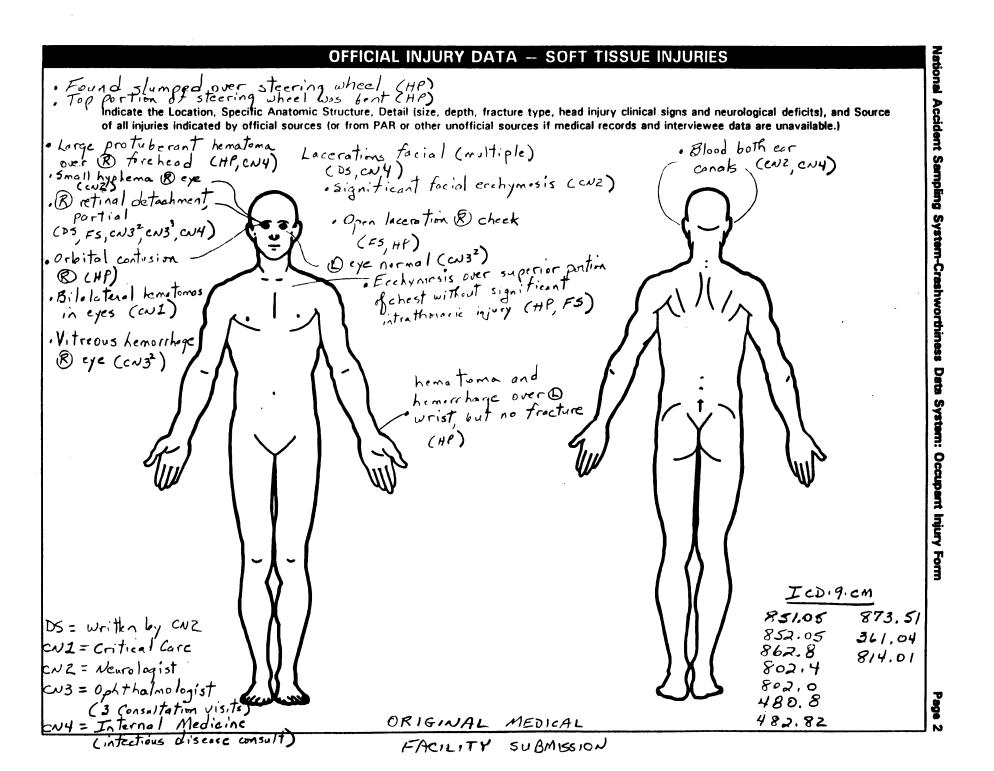
		_			A.I.S 9	90	····	•		Injury		Occupant
		Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusion Number
Con	Cussion 1st	5. 2	6/	7. 6	8. <u>0 2</u>	9. <u>/ 4</u>	10.5	11. 0	12.04	132	141	5. <u>00</u>
Cere Contu	bral siend R	D16. Z	17. /	18. <u>4</u> 1	9. <u>0 6</u>	20. <u>/ 4</u>	21. 3	22/	23. <u>0</u> <u>4</u>	24. <u> </u>	25 2	26. 00
Intr hemo	aventr grd crhoge	culer 27.2	28. /	29. <u>4</u> 3	o. <u>06</u>	31. <u>78</u>	32. <u>4</u>	33/	34. <u>04</u>	35. 2	36. <u>/</u> 3	7. <u>0 0</u>
Su bar hemor	rach not	38. 2	39/	40. <u>4</u> 4	1.06	42. <u>84</u>	43. <u>3</u>	44. <u>/</u>	45. <u>D 4</u>	46. 2	47. /	18. <u>00</u>
Open moxil	Fx ®	49. 2	50. <u>2</u>	51. 5	2. <u>08</u>	53. <u>0</u> 0	54. 2	55	56. <u>0 5</u>	57.	58. <u>/</u> £	o <u>O O</u> .ea
Commin. Nasal	uted FX	60	61. <u>2</u>	62. <u> </u>	3. <u>/ 0</u>	64. <u>04</u>	65 . <u>2</u>	66. 🕌	67. <u>0 5</u>	68/	69	0. <u>0 0</u>
FxD	Wrist 7th	71.2	72. <u>7</u>	735 7	4.20	75.02	76. <u>2</u>	77. <u>\</u>	78. <u>04</u>	79. <u>2</u>	80. <u>/</u> 8	31. <u>00</u>
R) Re Detach	tinal ment	82. 2	83. 2	84. <u>4</u> 8	15. <u>/ 0</u>	86.02	87. 2	88. /	89. <u>45</u>	90. <u>2</u>	91. / \$	12. <u>0</u> 0
Hyph B ey	ena 9th e	93. 2	94. 2	95. <u>4</u> 9	6. <u>0.6</u>	97. <u>D</u> <u>H</u>	98/	99. /	100. <u>45</u>	101. 2	02 10)3. <u>00</u>
Vitr hemor B e		1041	05. 2 1	06. <u>4</u> 10	1. <u>16</u>	108. 9 9	109/	110. <u>/</u>	111. <u>45</u>	112. 2	113. / 11	14. <u>00</u>

					OCCL	IPANT I	NJURY	DATA				
		Source of Injury Data	Body Region	Type of Anetomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupent Area Intrusion Number
® pe Lem	riorbita 11th atoma	12	2	9	<u>74</u>	02	_/	7	05	2	_/	00
D p hemo	eriorbi 12th Homa	112	2	9	74	02		2	05	2		00
	atoma (R 13th head	2	2	2	04	02		7	04		_/	00
Lac B1	eration 14th P	2	2	9	06	02	<u>/</u>	<u>8</u>	05	<u>/</u>		00
Ecc Fac	hymosis 15th C	2	2	9	04	02	<u>/</u>	9	06	2		00
Eec sup	hymosis 16th erion che	1 2	4	9	04	02	<u>/</u>	4	04	2		00
Con upp	tusion 17th er abdon	<u>6</u>	5	9	04	02		<u>7</u>	41	2	_	00
	atema (18th	0 4	7	9	04	02	_/		04	3	<u>/</u>	00
:	19th	<u>3</u>	7	9	04	02	/	2	04	2	_	00
	20th	_		_				_		<u> </u>		
	21 s t		40-	_			_	_				
	22nd	_	_					_		· —	_	
	23rd		. -			·	_			_		
	24th	-						-		_		
	25th								:			

BODY DIAGRAMS AND MEDICAL RECORDS
FROM

ORIGINAL MEDICAL FACILITY SUBMISSION¹³

Specifically, these body diagrams are based on the medical records that this contractor obtained from the initial treatment medical facility as part of their original records submission.



SOURCE OF INJURY DATA OFFICIAL

- (1) Autopsy records with or without hospital/ medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lav coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (O2) Mirror
- (03) Sunvisor
- (04) Steering wheel nm
- (05) Steening wheel hub/spoke
- (06) Steening wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape
- deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header,
 - A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by extenor object (specify):
 (19) Other front object (specify):

LEFT SIDE

- (20) Left side intenor surface.
- excluding hardware or armrests (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-piller
- (24) Other left piller (specify):

- (25) Left eide window place or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-piller, B-piller, or roof side rail.
- (27) Other left side object (specify):
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-piller
- (34) Other right pillar (specify):
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: trame, window sill, A (A1/A2)-pillar, B-piller, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint 8-pillar or door frame attechment point
- (43) Other restraint system component (specify):_
- (44) Head restraint system
- (45) Air bag (use codes *16" and *17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):
- (47) Intenor loose objects
- (48) Child safety seat (specify):
- (49) Other intenor object (specify):

BOOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail (53) Roof right side rail
- (54) Root or convertible top

- (56) Floor (including toe pen)
- (57) Floor or console mounted transmission lever, including console
- (58) Perking brake handle
- (59) Foot controls including parking brake

RFAR

(60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, entenna)
- (67) Other extenor surface or tires
- (specify):
- (68) Unknown extenor objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify):
- (73) Hood
- (74) Hood omement
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify)
- (79) Rear surface
- (80) Undercamage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify):
- (83) Unknown extenor of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE **ENVIRONMENT**

- (84) Ground
- (85) Other vehicle or object (specify)
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass (92) Other noncontact injury source
- (specify): (93) Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certair
- (2) Probable
- Possible (3)
- Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- Indirect contact injury
- (3) Noncontact injury injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- (3) Neck
- Thorax (6) Abdomen
- Spme
- Upper Extremity Lower Extremity Unspecified
- Type of Anatomic Structure
- Whole Area
- Vessels Nerves
- Organs (includes muscles/
- ligaments) Skeletal (includes joints)
- Head LOC Skin

- Specific Anatomic Structure
- Whole Area
- (02) Skin Abrasion (04) Skin Contusion
- (06) Skin Lac ration (08) Skin Av. sion
- Amputation (20) Burn
- (30) Crush
- (40) Degloving (50) Injury NFS
- (90) Trauma, other than mechanical
- Head LOC
- (02) Length of LOC
- (04, 06, 08) Level of Consciousness

- Spine (02) Cervical
- (04) Thoracic (06) Lumbar
- Vessels, Nerves, Organs, Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

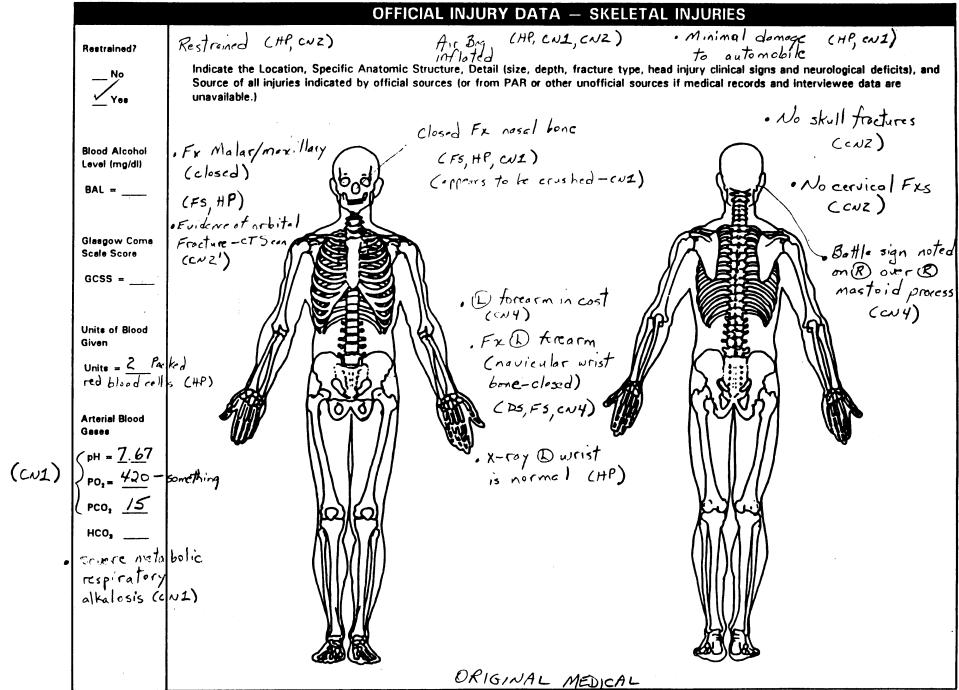
- Specific injunes are assigned consecutive two-digit numbers beginning with 02.
- To the extent possible, within the organizational framework of the AIS, OO is assigned to an injury NFS as to seventy or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor injury
- Moderate injury (2)
- Senous injury (3)
- (5) Critical injury
- (6) Maximum (untreatable) (7) Injured, unknown severity

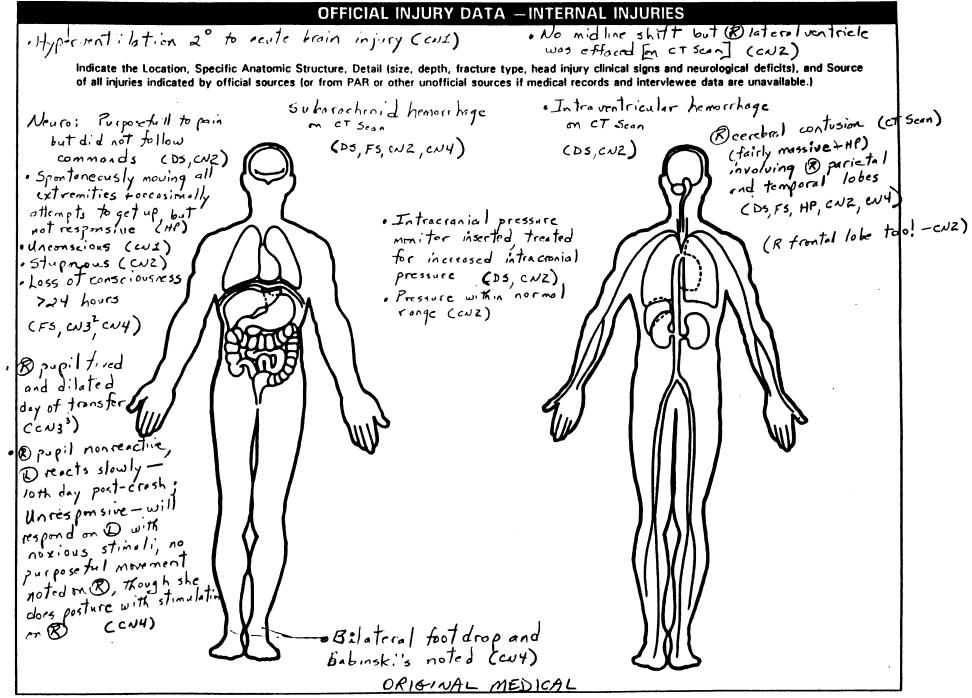
Aspect

- Right (2)
- Left Bilateral (3)
- Central (6) Antenor
- (6) (7) (8) **Postenor**
- Superior Intenor
- (9) Unknown
- (0) Whole region



FACILITY SUBMISSION

7898



FACILITY SUBMISSION

Hospital

Final Summary

Date of Admission	94		
Date of Discharge	94	Admissio	n#
Attending Physician(s)		DOB:	
Consulting Physician(s)			
) , ()		
PRINCIPAL DIAGNOSIS:	Right cerebral c	contusion with subarach	noid hemorrhage
SECONDARY DIAGNOSES:	Facial laceration Right retinal de Fractured left fo	tachment	
PROCEDURES:	Tracheotomy, re PEG tube	pair of facial laceration	is and insertion of
SUMMARY: (DISCHARGE SUMMARY MUST INCLUDE: 1-		tinent Findings: 3Treatment	: 4Condition on Discharges
5-	-Follow-Up Instruction	ns to Patient	
This 62 year old woman was an embankment. Air bag did ER by Dr.	the solo occupand inflate but she	t of an auto which wen was injured. She was e	t over a hill, over valuated in the
On exam on admission she was follow commands. CT showed hemorrhage. Dr. Tresconsulted for critical care of the same treated with usual Ophthalmology consultation placed a PEG tube for nutrice of the case. She continued to ophthalmology. We went ahe patient continued to improve congestion. She was seen by Herpes Simplex was made.	d traumatic subarapaired the multiple onsultation. Intra treatment for increase obtained by I dition. She had mile of the trauma surgest the trauma surgest of the slowly but then	achnoid hemorrhage and a facial lacerations. Drustine ased intracranial preserved intracranial preserved diabetes insipidus for obtained for question thought she was surosurgery, plastic surtomy on the plant of th	d interventricular was was was inserted. ssure. saw her and llowing the injury. of a navicular table and signed off rgery, and it difficulty. The ever and pulmonary
I certify that the narrative descrip accurate and complete to the best of		and secondary diagnoses and	major procedures performed i
	Signed	, M.D.	Dote Page
FINAL SUMMARY NAME: Page: 2	Signed	, м. <i>D</i> .	Date ·
The patient was treated wir	th anti-viral agen	ts Additional consultat	tion with Dr.

The patient was treated with anti-viral agents. Additional consultation with Dr. was obtained. His diagnosis was traumatic retinal detachment.

The patient continued to improve and was seen in rehabilitation medicine consultation by Dr. The patient was eventually transferred to the patient was event

HOSPITAL PHYSICIAN ATTESTATION STATEMENT DATE (94

MED REC NO NAME DIS/DEPART DATE ROOM/BED ADM/VST DATE AGE 62 SEX F LOS DSCH DISP DATE OF BIRTH ATTENDING PHYSICIAN DIS AND DISOR OF THE NERVOUS SYSTEM TRACHMY EX FACE, MOUTH AND NECK DIAG OUTLIER STATUS ADMITTING DIAGNOSIS 851.05 CORTEX CONTUS-DEEP COMA PRINCIPAL DIAGNOSIS 1. 851.05 CORTEX CONTUS-DEEP COMA DIAGNOSIS TYPE SECONDARY DIAGNOSES 862.8 INTRATHORACIO INJ NOS-CLEOTUSION, Intrathoracio
802.4 FX MALAR/MAXILLARY-CLOSE C
802.0 NASAL BONE FX-CLOSED S
480.8 VIRAL PNEUMONIA NED Implie S
482.82 F COLL SNEUMONIA з. 4. 5. 6. 482.82 E. COLI PNEUMONIA 873.51 OPEN WOUND CHEEK-COMPL 7. 8. 9. 361.04 PART DETACH-DIALYSIS FELLA 10. 814.01 FX NAVICULAR, WRIST-CLOS 11. E816.0 LOSS CONTROL MY ACC-DRIV PROCEDURE TYPE PROCEDURES DATE 31.29 OTHER PERM TRACHEDSTOMY F. 1. 43.19 GASTROSTOMY NEC 01.18 OTHER BRAIN DX PROCEDURE ICPM ਾ. 21.71 CLOS REDUCTION NASAL FX 4. 5. 27.59 MOUTH REPAIR NEC 86.59 SKIN SUTURE NEC 6. ENDOSCOPIC BRONCHUS BX 33.24 7. 8. VAD INSERTION 86.07 96.72 CONT MECH VENT->95 HOURS

I CERTIFY THAT THE NARRATIVE DESCRIPTIONS OF THE PRINCIPAL AND SECONDARY DIAGNOSES AND THE MAJOR PROCEDURES PERFORMED ARE ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

ATTENDING PHYSICIAN DATE

HOSPITAL

Personal History and Physical Examination

Name	Admission #	Room #	Date Admitted
			/94
DAR.			

CHIEF COMPLAINT & HISTORY OF PRESENT HANES:

old female who was apparently the solo occupant of her automobile when as she approached a hill she was forced into a guard rail which caused her to spin around and accelerate backwards up the hill and over an embankment. The car apparently brushed a tree and she was found slumped over the steering wheel. The highway patrolinan and the patient's husband are available for comment. The top portion of the steering wheel was apparently bent. She was restrained and the airbag did inflate. The first individual on the scane was unable to remove the patient from the automobile. The highway patrolman explains that there was minimal damage to the automobile with no other significant injury to the interior. The windows were all intact.

MEDICATIONS: Calcium, occasional aspirin.

ALLERGIES: No medical allergies.

<u>PAST HISTORY</u>: The patient had undergone vein stripping in the past and some podal procedures. Otherwise, no significant injuries, illnesses, operations, or hospitalization. There is no history for heart disease or lung disease, or other systemic disorders.

PHYSICAL EXAMINATION: The patient is on the rigid board in the trauma unit. There is blood over her face and neck. She is wearing a cervical collar and one of the attendants is holding a direct pressure bandage on the right side of the face. The patient is spontaneously moving all extremities and occasionally attempts to get up. She is intubated and has two peripheral IV's. She has received more than two liters of lactated Ringers by the time she is delivered to the trauma unit. Her vital signs have been stable, but she has not been responsive.

The systolic pressure remains above 100 mmllg throughout the examination and the pulse rate varies between 50 and 60 bpm. The initial oxygen saturation is less than 90. Blood gases reflect hyperventilation with some compromised acration.

There is an irregular, deep laceration of the right cheek, but bleeding is limited with direct pressure. There is a large, protuberant hematoma over the right forehead.

Breath sounds are diminished in the left lung when compared with the right which seems to be well-ventilated.

The abdomen is flat, nondistended, and there are some audible bowel sounds. There is no organomegaly or guarding. Foley catheter is eventually placed and it drains clear urine.

The extremities reflect excellent peripheral pulsos without peripheral edems. There is hemorrhage over the left wrist but an eventual film demonstrates no fracture.

HISTORY AND PHYSICAL NAME:
PAGE 2

A corvical spine film is obtained and appears normal. A chest film is obtained and demonstrates the orotracheal tube extending down into the right mainstem bronchus, so this is retracted with subsequent ventilation of the left lung also. A subsequent chest film confirms that the orotracheal tube has been properly positioned and the lungs are well-ventilated.

An orogastric tube is eventually placed and oxidized blood is ratrieved from the stomach. Its position is confirmed during subsequent CT scan.

On examination of the neck there is no cervical distortion. Traches is midline. There is no jugular venous distention. I do not hear bruits. The lungs are now well-ventilated. The heart rate is regular without murmur or gallop. There is no percussible cardiomegaly.

The patient is logrolled and there appears to be no injury to the back. She does have ecclipmosis over the superior portion of her chest without significant intrathoracic injury.

When I am satisfied the patient is properly ventilated and stable, she is taken to the Radiology Department where scan of the head and abdomen are obtained. We find evidence for fairly massive intracerebral contusion involving the right parietal and temporal lobes with nasal fracture. Scan of the abdomen is normal in that there appears to be no viscoral injury or hemographage. Pelvic films are normal. X-ray of the left wrist where she has hematoma is normal.

The patient is transfused 2 units of packed red blood cells utilizing a warmer.

IMPRESSION:

Severe right-sided intracranial contusion and facial fractures and lacerations sustained in a motor vehicle accident.

I have consulted Dr. and Dr. to manage the intracranial and facial injuries. Will consult ophthalmologist to evaluate the orbital contusion on the right side and will have Critical Care manage the respirator and systemic problems. The patient's husband is in agreement and our findings are discussed with him.

Signed	, M.D.
	M.D.
D&1	06/07

Hospital , Nebraska

Patient's Name	Admission #	Room #	Λge	Date
			62	94
Attending Physician M.D.	Consul	ting Physic	isn M.D.	
DOB:	ce:			

REASON FOR EVALUATION: This lady is ventilator controlled with a severe brain injury.

HISTORY OF PRESENT ILLNESS: This is a 61-your-old lifelong nonemoking lady who runs a restaurant, The in in NB, who was involved in an auto accident today when she was driving about 30mph, apparently skidded off a gravel road. and apparently scraped the guard rail, whereupon an airbag exploded, and she now has a severe brain injury. Apparently the car was not injured very much. Apparently they were able to drive the car away. It was apparently next to a bridge, but she apparently careened into another side of the road. She is now unconscious and has been intubated. She is on a mechanical ventilator at this time with a tidal volume of approximately 1,000, respiratory rate of 20. Arterial blood gases show pH 7.67, PCO2 15, and PO2 420-something. This is on 100% of O2.

PAST MEDICAL HISTORY:

General:

Significant in the fact that she's a lifelong nonsmoker. Has no history of any exposures or problems in the past. She has no history of ulcers. She is a very active lady and is usually very healthy.

GU:

There is no dysuria, homaturia, pyuria, frequency, or

burning.

Past Surgeries:

Skin graft in her right anterior abdomen and chest secondary to a burn, and has had some toenail hammertoe surgery in

the recent past. Has had no other hospitalizations.

Allergies:

Cardiac:

Respiratory:

None. Denies any past history of heart disease or problems with

pulmonary emboli or myocardial infarction in the past. No history of asthma, bronchitis. No recent colds or flu.

No pulmonary emboli or problems with chest pain or

orthopnes.

GYN:

Essentially negative.

Endocrine:

Denies any polydipsia, polyuria, heat or cold intolerance.

No history of diabetes or thyroid problems.

Skin: Musculoskeletal:

tuberculosis.

No evidence of skin rashes or arthritides. No recent myalgias or pains in the joints.

FAMILY HISTORY: Father with emphysema; otherwise, no history of exposures to

PHYSICAL EXAMINATION:

Goneral:

Exam tonight demonstrates a well-developed, well-nourished lady with a severe brain injury. Oral-tracheal intubation has been performed.

REPORT OF CONSULTATION NAME:

PAGE: 2

Bilateral hematomas in the eyes. Nose appears to be HEENT:

crushed, but oral-tracheal intubation has been performed.

Thyroid normal size, shape, and consistency. Neck:

Good breath sounds noted bilaterally. No wheezes, rhonchi, Chest:

raies, or crackles.

Shows a regular rhythm with no murmur, rub, or gallop. Heart:

Soft, scaphoid, and nontender. Small excoriations are noted Abdomen:

on the abdomen.

Show no edema, clubbing, cyanosis, or phiebitis. Extremities:

X-RAY: Chest film demonstrates no acute infiltrates, atalactasis, or infusion.

DIAGNOSTIC IMPRESSION: 1. Acute brain injury with resultant hyperventilation.

2. Previous burn anterior right chest and abdomen.
3. Previous surgery for hammertoe.
4. Lifelong nonsmoker.

<u>RECOMMENDATIONS</u>: Continue the hyperventilation at this time. She is to be kept on the mechanical ventilator. Decrease the rate and the tidal volume to about 800 and rate of 15, given the severe metabolic respiratory alcoholysis? and attempt to try and keep the PCO2 about 25-30 range. Continue monitoring very cautiously here in Intensive Care with placement of CVP in the morning.

Signed	_, M.D.
, M.D.	

Hospital, Nebraska

Patient's Name	ADM#	Room #	Age	Date
			62	94
Attending Physician	Const	ulting Physician		
DOB:				
car, a Ford Taurus, which Highway and the Street an	LINESS: This 62-year-old woman ch she was driving one mile sout rest, when she lost control of the earing a seat belt and apparently Hospital for trauma evaluation cologic examination in the emerger culation with purposeful movement	h of the county e car and went y the air bag in and was evalu ncy room she w	y line a cover a nflated. ated by as stur	at an . She was y porous bui
to be a local contusion in	and reactive. The right pupil is the region of the irls. There in the blood in both ear canals.	s irrogular and is significant fa	there icial	appears
showed hemorrhagic contu- some traumatic subarachn	x-ray showed no fractures per Dusion in the right frontal, pariet soid intraventricular hemorrhage. e right lateral ventricle was effa	al, and tempor There was no	al lobe	f the head s with to the
monitor in the subarachne	patient's husband, I placed a Coold space. Intracranial pressure inge. We did obtain some cerebratinged.	was B pressu	re of 7	mmHg
DIAGNOSTIC IMPRESSION	Y: 1. Right cerebral hemorrhagic subarachnoid hemorrhage.	c contusion wit	h traur	natic
RECOMMENDATIONS: Ma	untain cerebral perfusion pressu	re at greater t	han 15	mmHg.
Signed	, M.D.			
D&T-	4. D.			

Hospital . Nebraska

Patient's Name	Admission #	Room #	Age	Date
				94
Attending Physician	Consul	ting Physic	ian	

HISTORY OF PRESENT ILLNESS: This 62-year-old female was admitted on following motor vehicle accident. Injuries incurred in the accident include a right cerebral contusion with subarachnoid hemorrhage, facial laceration, right retinal detachment and a fractured left forearm.

His post-operative course has been complicated with fevers and pulmonary infiltrates. Bronchoscopy performed on 1994 with bronchoslveolar lavage reveled enterobacter aerogenes and viral inclusions. Herpes simplex viral antigen was positive.

Current antibiotics include Vancomycin 1 gram J.V. q 24 hours, started on Zosin 3.325 gram J.V. q 8 hours, started on 2007/94; and Fluconazole started on 2007/94; and discontinued

The patient underwent tracheostomy and insertion of percutaneous

PAST HISTORY: Prior history is very limited. Apparently she had a burn injury to the anterior chest and abdomen in the distant past.

ALLERGIES: None known or recorded.

FAMILY HISTORY: Unavailable.

SOCIAL HISTORY: Unavailable.

REVIEW OF SYSTEMS: Unavailable.

PHYSICAL EXAMINATION:

General:

VS:

HEENT:

An Ul-appearing female, unresponsive, though will at times

withdraw with noxious stimuli.

Temperature - 99.6. Pulse - 76. Respirations - 18.

BP - 126/72.

Normocephalic with contusion noted on the right frontal scalp. In addition, there is a Battle sign noted on the right over the right mastoid process. 'IM's are partially obscured with carumen and coagulated blood. Hearing -

> unable to assess. Eyes - pupils nonreactive on the right, left reacts slowly. EOM's - unable to assess. Sclerae are white, conjunctives are pink and moist without hemorrhages.

Hospital, Nebraska

Consultated. She Slit lamp examine hyphema than you he still has considered the right and 20 stachment which can the left eye within detachment we of scleral ruptured she should define temporal quadrate temporal quadrate.	a is not alert nation reveals esterday, and lerable edems ould possibly was normal.	and no she had there in the The robe a continuous wanted.	ns a is still no stina was arotidal arotidal arotidal by At that	
were dilated. She Slit lamp examing hyphema than you he still has considered the right and 20 stachment which can be selected that detachment we of scleral ruptured she should define temporal quadrate temporal quadrate.	a is not alert nation reveals esterday, and lerable edema) in the left. ould possibly was normal. which is possible, although to linitely be av-	and no she had there in the The robe a continuous wanted.	ns a is still no stina was arotidal arotidal arotidal by At that	
Slit lamp examing hyphema than you he still has considered and 20 stachment which can the right eye withing detachment was a cleral ruptured she should define temporal quadrate temporal quadrates.	nation reveals esterday, and lerable edems of the left. ould possibly was normal. Thick is possible, although to gery is indicated.	she had there in the The robe a consistency a constant of the first term of the constant of th	ns a is still no stina was arotidal arotidal arotidal by At that	
Slit lamp examing hyphema than you he still has considered and 20 stachment which can the right eye withing detachment was a cleral ruptured she should define temporal quadrate temporal quadrates.	nation reveals esterday, and lerable edems of the left. ould possibly was normal. Thick is possible, although to gery is indicated.	she had there in the The robe a consistency a constant of the	ns a is still no stina was arotidal arotidal arotidal by At that	
Slit lamp examing hyphema than you he still has considered and 20 stachment which can the right eye withing detachment was a cleral ruptured she should define temporal quadrate temporal quadrates.	nation reveals esterday, and lerable edems of the left. ould possibly was normal. Thick is possible, although to gery is indicated.	she had there in the The robe a consistency a constant of the	ns a is still no stina was arotidal arotidal arotidal by At that	
D.		D	Тость	
F CONSULTA	TION	6		
Hospita , Nebraska	Ī			
Adm. #	Room #	Age	Data	
		62	94	
Consulting Physician MD				
visual acuity meas lear, and she has She will be tran	surements. Is a deep sute sferred to	Pupil on orior cha	Amber.	
	Hospita, Nebraska Adm. # Consult patient is more avisual acuity measured and she has she will be tran	Adm. # Room # Consulting Physician MD patient is more alert than lass visual acuity measurements. It lear, and she has a deep aute She will be transferred to the er and repairing her retina su	Hospital , Nebraska Adm. # Room # Age 62 Consulting Physician MD patient is more alert than last time; visual acuity measurements. Pupil on elear, and she has a deep auterior che she will be transferred to be and repairing her retina surgically	

_, MD

, MD

Signed_

REPORT OF CONSULTATION

Hospital, Nebraska

Patient's Name	Admission #	Room #	Age	Date
				6/4/94
Attending Physician	Consul	ting Physic	ian	

HISTORY OF PRESENT ILLNESS: This 62-year-old female was admitted on following motor vehicle accident. Injuries incurred in the accident include a right cerebral contusion with subarachnoid hemorrhage, facial laceration, right retinal detachment and a fractured left forearm.

His post-operative course has been complicated with fevers and pulmonary infiltrates. Bronchoscopy performed on 1994 with bronchoslveolar lavage reveled enterobacter aerogenes and viral inclusions. Herpes simplex viral antigen was positive.

Current antibiotics include Vancomycin I gram J.V. q 24 hours, started on 25/94; Zosin 3.325 gram J.V. q 8 hours, started on 25/94; and Fluconazole started on 25/94 and discontinued 25/94.

The patient underwent tracheostomy and insertion of percutaneous esophagogastroduodenoscopy tube on \$10.000.

PAST HISTORY: Prior history is very limited. Apparently she had a burn injury to the anterior chest and abdomen in the distant past.

ALLERGIES: None known or recorded.

FAMILY HISTORY: Unavailable.

SOCIAL HISTORY: Unavailable.

REVIEW OF SYSTEMS: Unavailable.

PHYSICAL EXAMINATION:

General:

VS:

HEENT:

An Ul-appearing female, unresponsive, though will at times

withdraw with noxious stimuli.

Temperature - 99.6. Pulse - 76. Respirations - 18.

BP - 126/72.

Normocephalic with contusion noted on the right frontal scalp. In addition, there is a Battle sign noted on the right over the right mastoid process. TM's are partially obscured with carumen and coagulated blood. Hearing unable to assess. Eyes - pupils nonreactive on the right, left reacts slowly. EOM's - unable to assess. Sclerae are

white, conjunctives are pink and moist without hemorrhages.

REPORT OF CONSULTATION NAME:

PAGE: 2

Funduscopic exam reveals retibul detachment on the right.

The left retina appears normal without exudates or

hemorrhage. Sinuses are nontonder to parcussion. Nose is patent. Mouth - buccal mucosa is only partially visualized. What is seen is pink without exudate. Oropharynx not

visualized.

Neck:

Chest:

Lungs:

Breasts:

Heart: Abdomen:

GU:

Supple without palpable thyrold masses or

lymphadenopathy. Carotid upstroke brisk and full without bruits. No JVD noted. Tracken midling. Trackenstomy tube

in place. No drainage around the tracheostomy tube.

Symmetric. Axilla reveals no lumphadonopathy.

Coarse breath sounds are heard throughout the pulmonary

fields. No wheezing or rubs noted.

Normal female without masses or tenderness.

Regular sinus rhythm without murmur, rub or gallop. Peg tube in place. Soft. Active bowel sounds. No organomegaly, masses or tenderness on palpation.

External genitalia - Folay catheter in place. No inguinal

adenopathy noted.

Extremitles:

The left forearm is occluded in an orthopedic cast. She has bilateral foot drop. I do not, however, appreciate any joint effusions or erythema. Peripheral pulses are +2 in the upper extremities, diminished in the heat bilaterally. There is no

venous engorgement or varicosities noted.

Back: Symmetric. No pain on palpathen and percussion. No CVA

Neurologic: tenderness noted.

Unresponsive. Will respond on the left side with noxious

stimuli. No purposeful movement noted on the right side, though she does posture with stimulation on the right side. Hyperreflexic, particularly on the left side. Bilateral

Babinski's noted.

Derin: No mas

No masses. No rashes. Multiple contusions.

DIAGNOSTIC IMPRESSION: 1.

1. _____ leukocytosia.

- 2. Gram negative pneumonia with viral pneumonia component.
- 3. Right cerebral contusion with subarachnoid hemorrhage.
- 4. Right retinal detachment.
- 5. Fractured left forearm.

DISCUSSION:

At this time I would anticipate that the severe contusion sustained involving the right cerebrum would be sufficient to explain her neurological status. I do not feel that there is a component of herpes encephalitis complicating her clinical picture. Certainly the viral inclusions seen on bronchoalveolar lavage and the positive herpes antigen would be sufficient data to support the diagnosis of viral pneumonia, though the gram negative organism enterobacter serogenes I suspect is the significant culprit causing the pneumonic process.

REPORT OF CONSULTATIONAME: PAGE: 3	N
patient. I did discuss the	 I would continue the Zosin, but would increase it to 4.5 grams I.V. q 8 hours. I would add Aztreonam I gram I.V. q 8 hours. I would add Acyclevir 300 mg I.V. q 8 hours. I would discontinue the Vancomycin for now. I would obtain additional blood cultures with ARD times two sets, one hour apart. I would obtain a CBC and AMP in the morning.
	" D
Signed, M.D.	, M.D.
D/T	

BODY DIAGRAMS AND MEDICAL RECORDS FROM

REHABILITATION FACILITY¹⁴

¹⁴ Specifically, these body diagrams are based on the medical records that this contractor obtained from this patient's rehabilitation medical facility.

SOURCE OF INJURY DATA (61) Backlight storage rack, door, etc. (26) Left eide window glass or frame (26) Left side window glass including (62) Other rear object (specify): OFFICIAL one or more of the following: (1) Autopsy records with or without hospital/ frame, window sill, A (A1/A2)-piller, medical records EXTERIOR of OCCUPANT'S VEHICLE B-pillar, or roof side rail. (2) Hospital/medical records other than (27) Other left side object (specify): (65) Hood emergency room (e.g., discharge (66) Outside hardware (e.g., outside summary) (28) Left side window sill mirror, antenna) (3) Emergency room records only (including (67) Other exterior surface or tires associated X-rays or other lab reports) (specify): RIGHT SIDE (4) Private physician, walk-in or emergency (68) Unknown extenor objects (30) Right side interior surface, clinic excluding hardware or armrests EXTERIOR OF OTHER MOTOR VEHICLE (31) Right side hardware or armrest UNOFFICIAL (32) Right A (A1/A2)-piller (70) Front bumper (5) Lay coroner report (71) Hood edge (6) E.M.S. personnel (33) Right B-piller (72) Other front of vehicle (specify): (7) Interviewee (34) Other right pillar (specify): (8) Other source (specify): (73) Hood (35) Right side window glass or frame (36) Right side window glass including (74) Hood omement (9) Police (75) Windshield, roof rail, A-pillar one or more of the following: frame, window sill, A (A1/A2)-piller, (76) Side surface INJURY SOURCE B-piller, or roof side rail. (77) Side mirrors (78) Other side protrusions (specify) (37) Other right side object (specify): FRONT (01) Windshield (38) Right side window sill (79) Rear surface (O2) Mirror (80) Undercamage (O3) Sunvisor WITERIOR (81) Tires and wheels (04) Steering wheel rim (82) Other exterior of other motor vehicle (40) Seat, back support (05) Steering wheel hub/spoke (08) Steering wheel (combination (41) Belt restraint webbing/buckle (specify): (42) Belt restraint 8-piller or door frame of codes 04 and 05) (83) Unknown exterior of other motor vehicle (07) Steering column, transmission attachment point (43) Other restraint system component selector lever, other attachment OTHER VEHICLE OR OBJECT IN THE (specify): (08) Add on equipment (e.g., CB, tape ENVIRONMENT deck, air conditioner) (44) Head restraint system (45) Air bag (use codes "16" and "17" for injuries (84) Ground (09) Left instrument panel and below sustained from air bag compartment covers) (85) Other vehicle or object (specify) (10) Center instrument panel and below (11) Right instrument panel and below (46) Other occupants (specify): (86) Unknown vehicle or object (12) Glove compertment door (47) Interior loose objects (13) Knee bolster NONCONTACT INJURY (14) Windshield including one or more (48) Child safety seat (specify): of the following: front header, (90) Fire in vehicle A (A1/A2)-pillar, instrument panel, (49) Other interior object (specify): (91) Flying glass (92) Other noncontact injury source mirror, or steering assembly (driver (specify): side only) (93) Air bag exhaust gases (15) Windshield including one or more ROOF (50) Front header (97) Injured, unknown source of the following: front header, A (A1/A2)-pillar, instrument panel, or (51) Rear header mirror (passenger side only) (52) Roof left side rail INJURY SOURCE CONFIDENCE (53) Roof right side rail (16) Driver side air bag compartment cover LEVEL (17) Passenger side air bag compartment cover (54) Roof or convertible top (1) Certain (18) Windshield reinforced by extenor object (2) Probable (specify): Possible (19) Other front object (specify): (56) Floor (including toe pan) (9) Unknown (57) Floor or console mounted transmission lever, including LEFT SIDE console DIRECT/INDIRECT INJURY (58) Parking brake handle (20) Left side interior surface, (1) Direct contact injury excluding hardware or armrests (59) Foot controls including parking (2) Indirect contact injury (21) Left side hardware or armrest brake Noncontact injury (22) Left A (A1/A2)-piller (7) Injured, unknown source (23) Left B-piller REAR (24) Other left pillar (specify): (60) Backlight (rear window)

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head Face
- Neck
- (4) (5) Thorax
- Abdomen

- **Upper Extremity** (7)
- Lower Extremity
- Uneneckied

Type of Anatomic Structure

- Whole Area
- (2) Vessels Nerves
- (3) (4)
- Organe (includes muscles/
- boements)
- Skeletal (includes joints)
- Head LOC (6)

Specific Anatomic Structure

- Whole Area (02) Skin Abrasion
- (04) Skin Contusion
- (06) Skin Lec ration (08) Skin Av. sion
- Amputation
- (20) Burn

- (20) (30) Crush (40) Degloving (50) Injury NFS Trauma, othe (90) Trauma, other than mechanical

- Head LOC (02) Length of LOC (04, 06, 08) Level of Consciousness

- Spine (02) Cervical (04) Thoracic
- (06) Lumbar
- Vessels, Nerves, Organs, Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02

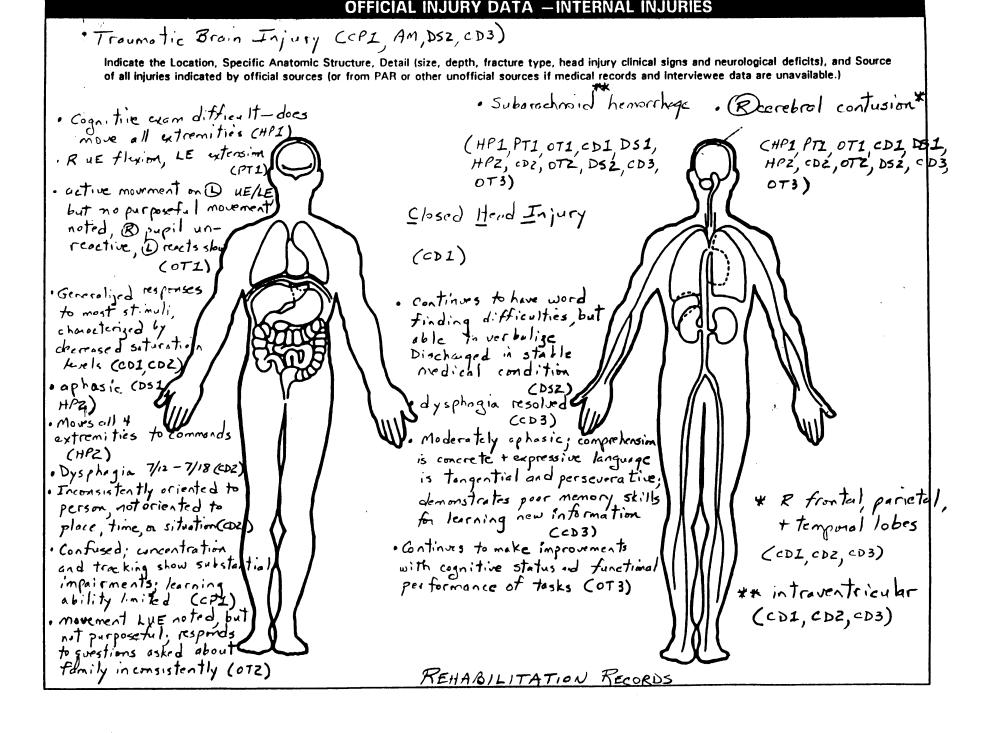
To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to

Abbreviated Injury Scale

- Minor injury
- (2) Moderate injury
- Serious injury (3)
- 141 Severe injury
- Critical injury (6)
- Maximum (untreatable)
- (7) Injured, unknown severity

Aspect

- Right
- 121 Lett
- Bileteral (3)
- (4) Central
- (6) Anterior (6) Posterio
- (7) Superior
- (8) Interior
- (2) Unknown
- Whole region



Rehabilitation Hospital

Comprehensive Inpatient/Outpatient Rehabilitation for:

- Traumatic Brain Injury
- Spinal Cord Injury
- Orthopedics
- Burn
- Stroke
- Neuromuscular Disorders
- Pediatric
 Rehabilitation

ACCREDITED:

 Commission on Accreditation of Rehabilitation
 Facilities (CARF)

MEMBER:

- American Hospital Association
- National Association of Rehabilitation Facilities (NARF)

Date: 94

- atty
Address:
Patient:
Case #
Information Sent: ## P's - Physicians dicks summaries; spastiaty alinic evals; Plader enslo; CD eval + D's; PT eval, Psych eval + D/s; OT eval + D/s
summaries; sparticity alinic evals; Clarker
engla: CD eval + Dt. PTeval Psyck
eval & D/s: OT eval & D/s
Please remit \$ to the above address to cover the fees for this service. Charges include \$ to cover up to the first 10 pages and \$ for each additional page.

Medical Records Staff

Thank you,

<u>PLEASE NOTE</u>: Use of this information for other than stated purpose is prohibited. Disclosure by recipient to any other party is prohibited. Destruction of copies after the stated need has been fulfilled is requested.

HISTORY & PHYSICAL ON:



CHIEF COMPLAINT: Status post traumatic brain injury.

HISTORY OF PRESENT ILLNESS: Ms. Hospital is a 62-year old white female admitted 194 to Hospital following a motor vehicle accident. Injuries included-right cerebral contusion with subarachnoid hemorrhage, facial laceration, right retinal detachment and tractured left forearm. Her hospital course was complicated by pulmonary infiltrates, herpes simplex antigen positive, required antibiotics. Eventually required a tracheostomy insertion of percutaneous G-tube on 1994. Past medical history is limited. Apparently had burn-injury to the anterior chest, abdomen.

ALLERGIES: None.

FAMILY: HISTORY: Unavailable.

SOCIALIHISTORY: Unavailable.

REVIEW OF SYSTEMS: Unavailable.

PHYSICAL EXAMINATION: Reveals a sell developed, well nourished white female in no apparent distress. Vital signs show a pulse of 80 and regular, bounding pulse. Blood pressure 140/92. Temperature is 98.2.

HEENT: Reveals PERRL, EOMI, NCAT. Nasal oral pharynx is clear.

Previous area of intercranial pressure monitor or kameno monitor is noted as clean, dry and intact and healing nicely. Patient will track briefly on examiner. Other cognitive examination is difficult. She does move all extremities well.

NECK: Is supple.

CARDIAC: Chest is clear. Cardiac exam regular rate and rhythm without murmur.

ABDOMEN: Soft and non tender. Normal abdominal bowel sounds. Liver and spleen are not enlarged. Abdomen is non distended. No masses noted.

EXTREMITIES: Without edema. Moving all four extremities well. Reflexes are not enhanced, tone does not appear to be a problem.

IMPRESSION: Middle aged white female status post traumatic injury who will initiate all therapy programs. I have ordered physical, occupational, speech and neuropsychology services. Will begin initial evaluations and follow closely. Will monitor all the medications. Currently there is no need for medications to:control agitation but this may become a problem later on in her course. Will monitor her bowel problem. This had been a problem somewhat at the acute care facility. Prognosis is guarded at this point in time. We will continue to monitor her medical condition. If we can wean her from the vent, it is possible that she would be admitted to the acute rehabilitation program.

REHABILITATION HOSPITAL PHYSICAL THERAPY EVALUATION

NAME				A	ge <u>62 </u>	DM DA	re 🚺	94 RM
יייי איייייייייייייייייייייייייייייייי	OFILE: MQ Dx:	when a	·· we	•	P	NSET_		44
PRECAUTION	cent Ochest to	pes su	Magak	TO TO TO				
BEHAVIOR:	AlertYES	NO	Or.	iente	dYES N	o NE	Impu:	lsiveYES (NO)
	Follows com	mands.	YES	NO	Ranch	<u>o</u> _	313	
	eyes open,	no a	temp	of to c	Emmun ,	dres	focus	
FUNCTIONA Sitti	ng balance	DEP	MAX	MOD	MIN/HOA	SBA	IND	N ₇
	ing balance	DEP	MAX	MOD	MIN/HOA	SBA	IND	
Trans	_	DEP	MAX	MOD	MIN/HOA	SBA	IND	
Mat m	obility	DEP	MAX	MOD (MIN/HOA	SBA	IND	ome landon.
WC mo	bility	DEP	MAX	MOD	MIN/HOA	SBA.	IND	rocking pendanc
Ambul	ation	DEP	MAX	MOD	MIN/HOA	SBA	IND	
De	vice							
Ga	it					ultur.		
Activ	ity toleranc	e ⁻ (30	minu	tes)	YES N	10 7	-	
NEUROMUSC	ULAR Key:	NM-	No mor	rement		AC	-Acain	nst-gravity
		RM-	-Beginr	ning m	ovement		• .	
		GE-	-Gravit	y eli	ovement minated	R-	-Resist	ed evaluated
		GE-	-Gravit Spastic	y eli	minated	R-	-Resist	Sul ² 50, 512,45°
	Strengt	GE- *-8	Gravit Spastic	ey elip city p	minated resent	R- NI	Stren	SLL SO SLL 45°
		GE- *-8 n R.	Gravit Spastic	ey elip city p	minated resent Bip F	R-	Resist	Sulated Sulated Sulated Sulated
Exte Abdu	exion NM A(nsion ction	GE- *-8 n R.	Gravit Spastic	ey elip city p	minated resent Hip F Ext Abd	R-NI Plexion ension luction	Stren	SLL SO SLL 45°
Exte Abdu	exion km Adnision ction ction	GE- *-8 n R.	Gravit Spastic	ey elin	minated resent Hip F Ext Abd Add External Ro	R-NI Clexion cension duction duction	Stren (R)	SLL SO SLL 45°
Exte Abdu Addu External Rot Internal Rot	exion K(R) (L Nim A(R) A	GB- *-8 1 R. 1 +(R)	Gravit Spastic O.M.	ej eli eity p	minated resent Hip F Ext Abd Add External Ro	R-NI Clexion ension luction luction otation	Strength (R)	SLE SO SLE 45° ngth R.O.M. (L) (LAT) (A) Parm AU WAL WAL
Exte Abdu Addu External Rot Internal Rot Elbow F1	exion km Adnision ction ction ation	GE- *-8 n R.	Gravit Spastic O.M.) (L)	ej eli eity p	minated resent Hip F Ext Abd Add External Ro Internal Ro Knee F	R-NI Clexion cension duction duction	Strength (R)	SLL SO SLL 45°
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin	exion NM Annsion ction ction ation ation exion mision with the state of the state o	GE- 	Gravit Spastic O.M.) (L)	ey elin	minated resent Hip F Ext Abd Add External Ro Internal Ro Knee F Ext Foot Dorsis	R-NI Clexion tension tuction tation tation tlexion tension flexion	Street (R)	SLL SO SLL 45° Ogth R.O.M. (L) (LR) (L) Dem AU WAL WAL
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron	exion NM Annoion ction ction ation ation exion mation exion stion ation ation exion stion ation exion stion still	GE- 	Gravit Spastic O.M. (I)	ey elin	minated resent Hip F Ext Abd Add External Ro Internal Ro Knee F Ext Foot Dorsin	R-NI Clexion tension tuction tation tation tlexion tension flexion	Street (R)	SLL SO SLL 45° AGTH R.O.M. (L) (L) R) (L) PEM AU WAL WAL
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte	exion NM Adnision ction ction ation exion exion stion ation ation exion	GE- 	Gravit Spastic O.M. (I)	ey elin	minated resent Hip F Ext Abd Add External Ro Internal Ro Knee F Ext Foot Dorsing	R-NI Clexion cension duction otation otation clexion cension flexion flexion	Street (R)	SLL SO SLL 45° Ogth R.O.M. (L) (LR) (L) Dam AU WAL WAL
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte Finger Fl	exion K(R) (L	GB- 8 R.) +(R)	Gravit Spastic O.M. (I)	ey elim	minated resent Hip F Ext Abd External Ro Internal Ro Knee Ext Foot Dorsif Plantari	R-NI Clexion lension luction obtation obtation clexion cension flexion version	Street (R)	SLL SO SLL 45° AGTH R.O.M. (L) (L) R) (L) PEM AU WAL WAL
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte Finger Fl Exte	exion NM A(nsion ction ction ation ation ation stion exion e	GE- 	Gravit Spastic O.M. I (L)	ry elipsity p	minated resent Hip F Ext Abd External Ro Internal Ro Knee Ext Foot Dorsin Plantari Internal Ro Ext	Clexion ension duction otation otation election election flexion flexion rersion rersion	Strein (R)	SLE SO SLE 45° SILE SO SLE 45° THE WALL WALL WALL WALL W
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte Finger Fl Exte	exion NM A(nsion ction ction ation ation ation stion exion e	GE- 	Gravit Spastic O.M. I (L)	ry elipsity p	minated resent Hip F Ext Abd External Ro Internal Ro Knee Ext Foot Dorsin Plantari Internal Ro Ext	Clexion ension duction otation otation election election flexion flexion rersion rersion	Strein (R)	SLE SO SLE 45° SILE SO SLE 45° THE WALL WALL WALL WALL W
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte Finger Fl Exte	exion NM Administration ation exion	E Company	Oravitos pasticos (C.M.) (IL) ry elipsity p	minated resent Hip F Ext Abd External Ro Internal Ro Knee Ext Foot Dorsin Plantari Internal Ro Ext	Clexion ension duction otation otation election election flexion flexion rersion rersion	Strein (R)	SLL SO SLL 45° SLL SO SLL 45° THE WALL WALL AU WALL	
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte Finger Fl Exte	exion NM AI nsion ction ation ation exion insion exion	E Company	Oravitos pasticos (C.M.) (IL) Tr	minated resent Hip F Ext Abd External Ro Internal Ro Knee Ext Foot Dorsin Plantari Internal Ro Ext	Resion ension duction obtation obtation election election flexion rersion rersion rersion wersion	Strein (R)	SIL SO SIL 45° SIL SO SIL SO SIL 45° SIL SO SIL S	
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte Finger Fl Exte Comments:	exion K(R) (L NM Ai NS NS Ai NS NS NS NS NS NS NS N	E Comt Condom (ML	Oravitos pasticos (C.M.) (IL) Tr	minated resent Hip F Ext Abd Add External Ro Internal Ro Knee Ext Foot Dorsin Plantari Internal Internal Internal Ext The Continuation of the Con	Renion luction luction of tation of tation flexion flexion rersion rersion have a MARK	Strein (R)	SLESO	
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte Finger Fl Exte Comments: Sharp/dull	exion K(R) (L NM Ai NS NS Ai NS NS NS NS NS NS NS N	E Comt Condom (ML	Oravitos pasticos pas	Tr Ab	minated resent Hip F Ext Abd Add External Ro Internal Ro Knee Ext Foot Dorsin Plantari Internal Inter	Remains the state of the state	Strein (R)	SLE SO SLE 45° SILE SO SLE 45° THE WALL WALL AT WALL
Exte Abdu Addu External Rot Internal Rot Elbow Fl Exte Supin Pron Wrist Fl Exte Finger Fl Exte Comments: Sharp/dull	exion K(R) (L NM Ai NS NS Ai NS NS NS NS NS NS NS N	E Comt Condom (ML	Oravitos pasticos pas	Tr Ab	minated resent Hip F Ext Abd Add External Ro Internal Ro Knee Ext Foot Dorsid Plantard Internal Unk dominals	Remains the state of the state	Strein (R)	SLE SO SLE 45° SILE SO SLE 45° THE WALL WALL AT WALL

POSTURE	20					
	BUE flex,	ie ext				
WHEELCHA		10				٠
)E				
No.9	Pain Edema Leg-lengt Ulcer	th discrepancy		abluxation eglect Isual defi	cits	
HOME ENV	IRONMENT/PF	RIOR FUNCTIONAL			NE	
Knuns RE	stantant +	5	h	1. NG	•.	
_						
						
ASSESSMEN	1. Pt appea	eco to be begin	ning to	r alerto	roso	
STRENGTHS	/ABILITIES:	i Random (D	18 + IB	micuing		
		-2- opening 1	eges			
			·			
PATIENT_P	REFERENCES	-NE				
٠						
PATIENT/P	AMILY EDUC	ATION NEEDS: 78	I. Level	+ recove	ny	*
PATIENT N	EEDS: FE	sed mor				
	7 4	bal				
	3. ↓	transfers amb + "IC			•	
		Boide mive	runt.			
•	3• , ▼		•			
SHORT-TER	M-GOALS:T/	zwks)	0			
	1.	Sitting bal me	d			
	ė	Sitting bal mod Rolling mod Transfer mo 4. Alert each a	و و و ع			
	•	i aliat each a	ression.			
LONG-TERM	PROJECTIO	NS: (3 mos.) -	(4 mes)			
	-	1. Describes most	•		F -	Λ.
	•	3. Transfer my	\sim	6. Fellor	v simple c	ommanus
		4. amb 20' de	wice mi	``		
PLAN: In	ndividual (\sim	Group		W	
		_				
Ot	her	IR				
		OT.			-94	
Therapist	Signature		 -	Date		
- ,	-		•			

For-Herper Simplex viral antigen Vent pt.

					NAL INEKA						LUATION				
				-	REHA	RII	JITA:	110	N HO	SPITAL			Be f	lau	
											101				
NAME*							ADMI				94 ONS	ET DATE	#		br
ROOM H					ED TO OT								.		•
DIAGNOSIS MV	٠٠٠	JE)	cerit	nl	unision	150	bar	ari	Moi	d hence	there Fre	ul low	ration	L. P	uetin
HISTORY 心红	uli	new	() d	X (() forearm	4	, 4	1711	heo	stony	J	HXI	1- br	un to	ant.
PRECAUTIONS					U		<u> </u>						-	au	أحله أم
	_	DDR	• "							,	NE -				<u> </u>
SIGNIFICANT OT	ERS	JDI:	SCHA	RGE	PLANS NA	un.	id								-
UE FUNCTION: WI	FL C	or -	STR	MGI	THE AMED RAIN	GE (OF M	OTI	ON:	WFL OF	- = def	lcit	_	-	-
AN PLACEMENT	R	L			ACTION		DICTE		ROM.	PART	ACTION -	STRENGTS	1 -	ON	
Resob forward		1	<u> </u>			R	L		L			RIZ			
Rand:to:mouth	<u> </u>	<u> </u>	8200	lder	Abduction			140	-1	Wrist	Plexion			1 Car	天
Reach above head		<u> </u>	<u>l</u>		Boriz. Abd.			PE		1	Extension		71	1	•
Reach behind head		<u> </u>	ļ		Boriz, Add.	<u></u>	<u> </u>		ļ	Pinger	arip		11		-
Reach behind back		! -			Plexion	<u>. </u>	!	1	<u> </u>	<u> </u>	Extension		<u> </u>	1 4	<u>_</u>
Mand from side			i !		Internal	1	1	!	1	Spestic	ity/Flaccidi	ty:		. ــ .	· (2)
Band to table top		<u> </u>	1		Rotation			 	1	Julian	ating his	wyone	press		~ ©
Manc to capte top		i	! 		Rotation	i I	1	1.1	1 .	<u> </u>					
HAND STRENGTE:		 	Elbo	-	71exion		 	1-1	+	T Pada (Ca	ntracture:				<u></u> :
DOMINANCE:		1	Ī		Detension		1	t١	i		meracentai				
COORDINATION - GROSS:			Tore	LTB	Supination		1 .	- 1	Mie	NUSCLE	GRADES:		-		-
			-		Pronation		ī	t Y	-1:-1	•	Normal 3/	5 7747	. 1/8 -	~	
रक्रांटे					1			1.	- V		Good 2/		0/5 =	Zero	•
PURCEIONAL USE OF UPP	ER E	XII QUIC	iir: k	ليولم	active mor	me	ut	v	(D)	here.	, no purpe	seful y	nen 't	no	FIA:
pt, restless, 8											/ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				,
ACTIVITIES OF I	DAII	Y L	IVIN	3: I	ist level	of	288	ist			3.00				
HYGINE:				- MG	SCHLIAMBOUS:					<u> </u>	DITIONAL COM	MERTS			b
1. Brush teeth		De	42		Write name				De	\$					_
2. Wash hands and fac	: 8	 			Pick up objec	et fr	ca :1	oor	-	<u>, </u>	verall patie	nt'is:			
3. Shave or make-up		-			Bearing				-		20,40				
6. Comb hair 5. Toilet hygiene		 	`		Handle telep!	1008					The second	OF UE CAPE			
6. Bath, shower		 	 	 -	Bitting						Dec.	or LE care	•		
DRESSING:		1	†		Standing				 		1	or HE Care			
1. Cardigan garment		1			ANDTER:				IN	OUT	less.	or oral, h	.4		_
2: Slipover garment		1		1.	Toilet				i	1	 :	01 0141, 1	err e ô	TOURIN	F
3. Slacks		<u> </u>	T_{-}	1 2.	Bed					li -					
4. Socks -		1	1	∫ 3.	Chair					li .					
5. Shoes		1		14.	Dathtub					11					
6. Underclothes			٠,	5.	Wheelchair				1	li .					
7. Dress completely		<u> </u>	\\/		D ACTIVITIES:										
8. Pastenings		1	<u> </u>		Bit up in be				<u> </u>						
PERDIFO:		49-	I DO K		Sit on edge	of be	<u> </u>		1						
1. Manage solids with					CONTROL:				1	 					
2. Manage liquids with 3. Cut with knife	ch ut	ens:1	•		Propel wheel				 	/-					
4. Drink from glass (or cu	D			Bandle cane/				+ 4	/					
5. Reach feeding area		*	1.	1											
6. Est at table			1 1/1	7]											
7. Ret entire meal			I	1											
ASSISTIVE DEVICES/OF	EDCR 1	QUIPM	zr:												_
$\setminus \underline{\hspace{1cm}} \mathscr{O}$															
DE ROLDING BRIXDAGE	HCE 19	JD.CD1	DEL M	SPOR	BERRE:						1				
Pt unable to		M	-se	m.	o, and	ne	<u> </u>	لمن	20	, m c	ment.				_
MORE TOLERANCE/ERDUR	ARCE:														_
1000 , my att	ent	MIL	<u> </u>												

JE SENSATION:		R	L		Com	ments
Pt responds to notions	Stimu	li				:
PRESSIONS OF IMPAIRMENT:	HOME	MILD	MODERATE	SEVERE		COMMENTS
RECEPTUAL ORIENTATION			1		l	
oraxia			1		L	
ody= Scheme			1		1	
ight-Left Discrimination				1	1	
cognition of Error			1	1	1	
ientation-time, place, person			,	1	1	
patial-Relationship	1				1.	
isual. Field					RY IN	sel unresotut, (D)
otor Planning				1 ~		
erseveration				1	1	
OTIONAL BEHAVIOR			T.	i	1	
npulsivity			i	i	i	
rustration/Anxiety	1		i i	WAR	i	
bility/Depression	1		1	1	 	
	POOR	FAIR	GOOD	EXCEL	LEKT	1
ARNING POTENTIAL	1		1	1	*****	1
tention Span		}		ŀ		i. I
llow Directions	- (i	1		
rryover Directions	1/-			 		1
mory,			<u> </u>	<u> </u>		
	1 4	<u> </u>	1	 		
equencing coblem-Solving	1	l	!			
ROBLEM AREAS:		L	4	<u> </u>		
ADL Skills		Puncti	onal Mobi	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		- F-5-4
Feeding Skills			heelchair			Safety
R/LUE Functioning			det Tran		_	Judgement
Cognitive/Perceptual		Field		RIGIE		Positioning
		Field	Cut			Memory
Apraxia						
LAN:						
ADL Retraining		Motor	Relearni	מת		Adaptive Equipment
Feeding Retraining		_	ity Train	•		Kitchen Evaluation
Increase UE Functioning/			fer Train			Energy Conservation
/ Strengthening			ioning	~~~		Joint Protection
Neuromuscular		_	ltive/Perc	fautos		Home Assessment/
Re-education		_	raining			Visit
Patient/Family Education		***				V

Goals: Time Frame 3 most works to Min Ht.

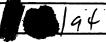
3 Privile John 1 top notor command 2-3x in 30 min session

3) Privile Johnny Frate purposeful nevernent & Que.

3) Mr will maintain Prom of Que despite of the. level of function Intensity of therapy planned: 3x | week

- * Signature

There



REHABILITATION HOSPITAL COMMUNICATION DISORDERS EVALUATION SUMMARY SHEET

NAME .		ADMIT DATE	EVAL DATE
ADDRESS		AGE/DOB (AZ	ROCM #
	No	MARITAL STATUS M	PHONE
DIACKOSIS	THU 5 AVM		CNSET
ALDICAL HX	CT - hemourhance co	Right from	al parietal, temperal E
Salvachnor	d introductorialis	heam	
PRICE IX FO	d Introventrieulen R THIS CONDITION	HOSP (of	TO
HICH # (OUT	PATIENTS)		
PHYSICIAN:_		·	
RIOGRAPHICA	L INFO Hush >	; run restauran	A -
PREINJURY CO	OMMUNICATION/SWALL	LOWING STATUS	ependent
OBJECTIVE DA	ATA Generalized u	espences to most	Stimuli Charactered
bir decreas	ed saturation leve	els' through-oxymetry	and increased posturior
Some locale	ed usesones to	tactile Stimulation	n. Score on Kappapor
Coma I Neus	-como Scale w	co- 2.8 Tellective o	of moderati coma
		м.	
FORMAL TEST	375IT.75	•	
STRENGTHS/AB	BILITIES Income 100	tent responses (typi	cally generalised)
to tark	le lauditory stimu	or tran	
	:	15ensory	
NEEDS (INCLU	JDING EDUCATION)	Canal Stimulation:	family education
re I CHI	, cammunication:	increase concentrat	ionlattention
	1		•
	, lèg		
PATIENT PREF	ERENCES		
			
PATIENT AIM(S) .	·	
1)	•		·
4)			
3)			

SPECIALTY :	VALUATION(S) RECOMMENT LOGYMOTOR SPEEC	HDYSPHAGIA _	AUGMENTATIV
TREATMENT I	DUALLAB	ONS PER DAY)GROUPX PER	WEEK
FIM/			
(TBI ONLY)	RANCHO LEVEL	DRSC/NC	
LONG-TERM F	ROJECTIONS I Rancho Scule	······································	
<u>V</u> elasto	20051200	ic skills to particip	tee in formal
	to communicate be	sic neclo	
4)			
+a	strate- 2 lucalyer	3 of S zero	
1) Démai ta 2) withdra 3) Localge	strate - 2 lucalyer ofthe stimulations of from tactile St	3 al S server	on 3 of 5 trial
1) Démar ta 2) withdra 3) Lo colge 4)	strate - 2 lucalyer ofthe stimulations of from tactile St	in to facted and	on 3 of 5 trial
1) Démar ta 2) withdra 3) Localge 4)	strette - 2 localyer ctile stimulations of from tactile St to auditer Stimula	in to facted and	on 3 of 5 trool
1) Démar ta 2) withdra 3) Localge 4)	Strate - 2 localyses ctile stimulations from tactile St to auditory Stimular IGNATURE/CREDENTIALS	in to facted and	on 3 of 5 trool

DISCHARGE SUMMARY ON:

DATE OF ADMISSION:

DISCHARGE DATE:
Acute Rehab Unit)

HISTORY OF PRESENT ILLNESS: 62-year old female was previously on the skilled unit for quite some time is now admitted to Rehabilitation Hospital. The patient was previously at Hospital following motor vehicle accident. Injuries included right cerebral contusion with subarachnoid hemorrhage, facial laceration, right retinal detachment, fracture of the left forearm. Her hospital course was complicated by pulmonary infiltrates, herpes simplex antigen was positive on bronchoscopy washings. She was treated with anti-viral agents. She required a tracheostomy insertion of percutaneous G-tube on 1994. She had a burn injury to anterior chest and her abdoment. She was sent up on the skilled unit where she was stabilized and felt to have achieved significant recovery to be able to participate in acute rehab program.

ALLERGIES: None.

REVIEW OF SYSTEMS: Patient does not respond to questions when asked about review of systems.

FAMILY HISTORY: Unavailable.

SOCIAL HISTORY: Apparently a non-smoker, otherwise unavailable.

PHYSICAL EXAMINATION: Alert female in no apparent distress. She is aphasic. Blood pressure 140/90. She is afebrile.

HEENT: PERRLA EOMs intact. Nasal pharynx clear. There is an incision area of the intracranial pressure monitoring noted to be dry and healed. Patient tracks on examination. She is aphasic except for counting. She does not answer questions.

NECK: Supple.

PULMONARY: Lungs clear to auscultation and percussion.

CARDIAC: RR S1 S2.

ABDOMEN: Soft and non-tender. Bowel sounds noted in all quadrants.

EXTREMITIES: Moves all 4 extremities to command. Has good range of motion noted about the plantar flexors but this was following a motor point block done yesterday. Some increased tone noted about the right lower extremity. Fairly good range of motion noted.

REHABILITATION HOSPITAL
DISCHARGE SUMMARY ON:
Page 2

, M.D.

, M.D.

HISTORY & PHYSICAL ON:



CHIEF COMPLAINT: 62-year old female with history of traumatic brain injury is seen today for admission to Rehabilitation Hospital.

HISTORY OF PRESENT ILLNESS: 62-year old female was previously on the skilled unit for quite some time is now admitted to Rehabilitation Hospital. The patient was previously at Hospital following motor vehicle accident. Injuries included right cerebral contusion with subarachnoid hemorrhage, facial laceration, right retinal detachment, fracture of the left forearm. Her hospital course was complicated by pulmonary infiltrates, herpes simplex antigen was positive on bronchoscopy washings. She was treated with anti-viral agents. She required a tracheostomy insertion of percutaneous G-tube on 1994. She had a burn injury to anterior chest and her abdomen. She was sent up on the skilled unit where she was stabilized and felt to have achieved significant recovery to be able to participate in-acute rehab program.

ALLERGIES: None.

REVIEW OF SYSTEMS: Patient does not respond to questions when asked about review of systems.

FAMILY HISTORY: Unavailable.

SOCIAL HISTORY: Apparently a non-smoker, otherwise unavailable.

PHYSICAL EXAMINATION: Alert female in no apparent distress. She is aphasic. Blood pressure 140/90. She is afebrile.

HEENT: PERRLA EOMs intact. Nasal pharynx clear. There is an incision area of the intracranial pressure monitoring noted to be dry and healed. Patient tracks on examination. She is aphasic except for counting. She does not answer questions.

NECK: Supple.

PULMONARY: Lungs clear to auscultation and percussion.

CARDIAC: RR S1 S2.

ABDOMEN: Soft and non-tender. Bowel sounds noted in all quadrants.

EXTREMITIES: Moves all 4 extremities to command. Has good range of motion noted about the plantar flexors but this was following a motor point block done yesterday. Some increased tone noted about the right lower extremity. Fairly good range of motion noted.

CLINICAL IMPRESSION: Middle-aged female with history of traumatic brain injury and retinal detachment is seen today for admission to Rehabilitation Hospital. We will follow through with Dr. recommendation concerning overnight stay at Hospital for repair of retinal detachment. We will follow her closely throughout her hospital stay. Prognosis for recovery is fair.

, M.D.

Rehabilitation Hospital

, Nebraska

CHANGE OF STATUS:

Rehabilitation Hospital on 94. She had a primary diagnosis of a traumatic brain injury secondary to a motor vehicle accident. The CT scan indicated a right frontal parietal and temporal hemorrhagic contusion with some subarachnoid intraventricular hemorrhaging. Results of the initial communication assessment indicated general responses to most stimulus characterized by decreased oxygen saturation and increased posturing. Some localized responses to tactile stimulus were observed. The patient scored 28 on the Rappaport Coma Near Coma Scale (moderate coma).

THERAPY: The patient was seen for individual therapy beginning —94 and continuing through —94. The patient was also seen for individual dysphagia therapy beginning —94 and continuing through —94, at which time the patient was transferred to the Acute Rehab program.

PROGRESS: The patient made excellent progress on the Complex Medical and Rehabilitation Unit. At the time or transfer, the patient demonstrated behaviors associated with a Level IV on the Scale. The patient was inconsistently oriented to person. The patient was not oriented to place, date or situation. The patient demonstrated severely confused language with perseveration on counting. Severe receptive language deficits were evident with the patient following 0 out of 4 1-step directions and answering 1 out of 4 yes/no questions accurately on the day of transfer. The patient was able to read some single words aloud but comprehension was questionable. No graphics were elicited.

A bedside dysphagia evaluation indicated a slight delay of swallow with solid foods. The patient's vocal quality was noted to be wet after intake of nectar or thin liquids. The patient was then placed in 1-on-1 dysphagia therapy for trials of pureed food with nectar liquids. The patient was seen only 2 times for oral intake trials prior to transfer. The patient required verbal cue to swallow

pureed consistency food occasionally. The patient's swallow was timely and lung sounds remain clear.

STRENGTHS/ABILITIES: The patient demonstrated good oral motor skills with speech 100% intelligible. The patient has strong family support.

NEEDS: The family needs ongoing education in the areas of language, cognition and swallowing.

PATIENT AIMS: Unable to state.

PATIENT/FAMILY TRAINING: Several family members have received training or education regarding orientation, appropriate language and cognitive stimulation, and swallowing information on different occasions.

EQUIPMENT: A memory log was provided to the patient for orientation and memory assistance.

SUMMARY: At the time of transfer, the patient continued to demonstrate good progress in speech/language and swallowing therapy. It is recommended that the patient continue to be seen one time per day for individual speech/language therapy and one time a day for individual dysphagia therapy.

LONG TERM GOAL: (3 months)

- 1. The patient will demonstrate cognitive linguistic skills indicative of a Level VII on the Scale.
- 2. The patient will effectively communicate wants and needs to family and friends.
- 3. The patient will be able to take adequate nutrition and hydration orally.

SHORT TERM GOALS: (2 weeks)

- 1. will follow 3 out of 5 1-step directions with moderate to maximum cues on 3 occasions.
- 2. The patient will answer yes/no questions regarding biographical information and personal state with 60% accuracy or above on 3 occasions.
- 3. The patient will tolerate a pureed with nectar diet with nursing supervision without signs of aspiration or difficulty.

4. The patient will be oriented to place with moderate cues on 3 occasions.

(((.SLD

, CCC-SLP

Speech/language Pathologist

Rehabilitation Hospital

., Nebraska

ADMISSION EVALUATION:

The patient is a 62 year old who is evaluated at the request of Dr. Patient is referred at this time secondary to a traumatic brain injury sustained on about \$10.94.

MENTAL STATUS: Overall, the patient's effort and level of participation with respect to history-taking and test performance in this session was limited by cognitive impairments associated with the presenting problem. The patient is confused. Concentration and tracking are showing substantial impairment. Learning ability at this point is very limited. Spatial organizational functioning is not assessed. Affect is suggestive of internal agitation.

PATIENT STRENGTHS AND ABILITIES: Good family support.

PATIENT/FAMILY GOAL: The patient is unable to state an important goal at this time.

IMPRESSION: The patient's circumstances and psychological situation at this point are notable for the following areas of concern: disorientation, agitation, distractibility, impulsiveness, memory impairment, confusion, poor reality contact, communication limitations, limited planning/organizing skills, limited insight and reasoning and judgment.

Based on today's presentation, priority aims of practical psychotherapeutic and psychoeducational intervention addressing the concerns relevant to patient aim include: promotion of improved orientation, improved capacity for learning and remembering new things, improved capacity for organizing and sequencing information, greater insight into current abilities and needs, development of improved decision-making and problem-solving skills, improved compensation for impairments in a social cohtext, acquisition of compensatory skills to reduce functional limitations, greater capacity to productively manage impulses, the ability to present self and experiences so as to minimize undesired reactions from others, and enhanced awareness of and ability to compensate for disability-related role competencies.



More detailed assessment will be scheduled as indicated over the course of the next few sessions, particularly in the areas of neuropsychological and emotional functioning.

GOALS: Short term goals include:

- 1. Patient will assist to the extent possible in ongoing identification of issues and goals.
- 2. Patient will experience improvement in concentration and tracking, capacity for new learning, insight into the current pattern of strengths and weaknesses, capacity for behavioral self-management, reasoning and judgment skills, and goal-setting skills.

Long term goals include:

- 1. Sufficient mastery of compensatory skills and strategies to permit attainment or maximal approximation of the patient's ruentified aim.
- 2. Satisfactory emotional adjustment to the challenges and losses associated with the patient's situation.
- 3. Provision of sufficient education and encouragement to family or other relevant social supports to promote optimal patient and social network adjustment.

PLAN:

- 1. Schedule patient for further assessment, as indicated by patient status and schedule.
- 2. Provide patient with strategies for managing active symptomatology during this initial adjustment interval.
- 3. Consult with other treatment team members to ensure an integrated approach.
- 4. In addition to individual treatment, schedule for the appropriate psychosocial support group to address as fully as possible the needs outlined above.

, \(\rangle \rangle \)

r. Ph.D.

Senior Psychologist
Certified Clinical Psychologist

Certified Clinical Psychologist

Page 2

Patient: CLINICAL PSYCHOLOGY

Room: Date:

94

Dir Herpes Simplex viral antigen vent pt.

						•					س و		
			•	OCCUPAT		THERAPY CHABILIT				i,	,		
HAME						IT DATE		194		DATE	11/15	14	
DIAGNO	M, ara	VH: (R	ceret	oral c	orpi	Slon 9	inba	calhr	wid k	بيستبدر	map f	-acial	lac
(R)،وا TOTELH	er got	ichment	fxC	frea	im.	tracke	Stemy	H_{x}	of p	um to	ant-	-Chat	- (A
	-	March	la inti	_	24	1 4 1	U		GR (C)	D.O.B	4	barno	
	•				<u> </u>		T	7			1 1	H	
RERAVI	OR: 1	LERT ((BS) NO	IMI	ULSIV	E TES	NO '	RANC	HO LOS	AMIGO	1605	_ E	
COMPARISO	TS:								··· · · · · · · · · · · · · · · · · ·				
									•				
FUNC	TIONAL	STATUS											
UEC	ARES		S	E MAX	MOD	MIN/HO	SBA	IND					
	CARES.		(D)	~		MIN/HO		IND					
	SPERS-			R WY		MIN/HO		IND					
	SFERS-1 MOBILI		Ç01	MAX P MAX	MOD	MIN/HOM		IND					
		œmaking			MOD	MIN/BOX		IND					
		mud				ont or	1	en.3	מענמ	Setial	min	- ncter	1:
04. 5	estless	Some	uha+	agit		Fluct		a hi		a nies		RUE	^J
7		,		J		·		7	3	7			•
		EPTUAL/		AR FT		ple to					عممير	<u>240</u>	r
Do	101-C-2	mino				penne	7		<u>9-9413</u>		0+12ch		٠, ١, ١
54-		- arba	rgi po	940.	4,000	1- Q . Y .	2) (()	Sprit	- +\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	comily	1,000	محنتهو	420
Dzivir	3.07	b.i.d	Drive:(Yes	No	Wish to	Drive	Agair	ı: Ye	B No	•		V
	·9					not	مهآو	40					
CTE	ZR					State	at	4	·2···+ /4	p			
age un	ው ለ <u>መ</u> ወልታሊ	TY FUNC	יידי ראי	/circle	domi	nant up	ner evi	- remi+	-v)				
		LII FORC		,	- ~~				-3/-				
ca	クナー	UB .								रिण			
YONE	PROM	AROM	KET						TONE	PROM	AROM	WMI	
000	WFL	WFL	7	Scapu.	la: El	evation			Name	IFUII PROM	WFL	NI	P+ +

0	<u>←</u> +2;	LUE						RUE		
TONE	PROM	AROM	MMT			TON	IB.	PROM	AROM	MMT
5	WEL	WFL	N	Scapula: Elev	ration	بحليم	70	Full PROM	WFL	NT -
1	1	1	,	Prot	raction	一个 26		1	1	
T			1		raction	1.40	9			гт •
	T - T		1 1	Shoulder: Fle	x_0-180°	l la				
	1	1		Ext		30/	1.			:
	1-1-		1	Abo	1 0-180°				1	
1	1-1-		1 1	Int Rot	0-90*					
	1			Bxt Rct	0-90°					
1	1 i		1	H. Abd	0-90*				1	1-1-
1	+	1 :	1 :	H. Add	0-45°				1	
 	1	1-1	1	Elbow: Flo	x 0-150°					
†	1		i i	Ext	E 0			1	<u> </u>	 - -
 	+-+	1		Forearm: Su	0-80°				- i	
	 	1	1	Pro				11	1	
 -	 	 	1 1	Wrist: Flo	ex 0-80°			11	1	
 	1 i	1	1 1	Ex					1	
+	 	0 1/	1 . 1 /	Gross Finger				1 11	17.	
† , 	1 1	100	111	Gross Finger			,	1.1	11/	
1/-	 \	+	1	Opposition			/-	14	\ \'	1 7

	LUE	COORDINATION	RUE	_
three group not	NT	9 Hole Peg Test	N	- Livers grasp not tested
feeted		Gross Control		- Cerris grape in the
The second	Ave	Gross Grasp		, Ave #

Page two: Patient
Rome Instruction: 0
Family Training/Education: Heed Chying education
Equipment: Tongs Elastic Sock Shoe-Walker Bath Hip Knee Denturn Laces Aid Horn Bag Sponge Book Book Brush
PATIENT'S PREFERENCES: Attinited seem to be better seemon them mornings PATIENT'S STREETES/ABILITIES: Supportive Family/freends FATIENT'S GOAL: Not Stated
ASSESSMENT OF PROGRESS TO DATE: Pt. maintained Prom of Que despite tone in extremit. Number of rehab objectives met qual mot and part of another graff Program completed: YES NO (explain) Pt. was transferred downstairs.
REEDS ASSESSMENT/RECOMMENDATIONS FOR CONTINUED TREATMENT:
ADL skills RUE functioning Cognitive/Perceptual skills Perseveration Mobility Safety Other Peeding skills Feeding skills Freeding skills Functioning Field cut Judgement Field cut Fiel
OZHER .
Pain Splint Sling Braces.
OCCUPATIONAL THERAPY PLAN
ADL retraining Increase upper extremity function Cognitive/perceptual retraining Tub\toilet transfers Community reintegration Safety training Ritchen evaluation Upper extremity strengthening Feeding training NDT NDT Adaptive equipment Home program Adaptive equipment Home assess/visit Energy conservation
LONG TERM PROJECTIONS: (3 mn) weeks to Min (A) level of function)
2. Pt. will require min @ to complete oral hygiens, and grooming. @ \$\text{I} \text{ Seef beeding} 4. Attend to 30 mungle cognition returning relevant a <3 verbal aussing for use bot hing. SHORT TERM CORLS: [\alpha \text{ works \$\mathbb{O} \mathbb{D} us stre for a complete or well a complete or a complete o
2 of will be sointed a -
2. Pt. will be oriented x3 = environmental_cueing during tx_session. 2. Pt. will complete 2 out of 3 hygiens tasks = minimal verbal cueing by 2 wiss. 3. Pt. will require mod @ to bathe UE: = min. verbal-cueing-during tx session. 4. Pt. will panifer from w/c= met = 1 max @.
Signature. Date: 194

PHYSICAL MEDICINE AND REHABILITATION

Nebraska



PATIENT	NAME:	DATE:	94

SPASTICITY MANAGEMENT CLINIC

SPASTICITY CLINIC EVALUATION AND PROCEDURE TODAY: Left APF permanent motor point blocks.

INDICATIONS: Reduction of severe tone causing equinovarus deformity.

NOTE: 7 mg Versed IM given by M.D. prior to procedure for sedation.

PROCEDURAL NOTE: [] The procedure, all side effects, indications and contraindications were explained and a written consent was obtained from ______, the patient/quardian.

[x] Written consent is on file.

The skin overlying the left popliteal fossa was prepped in the usual sterile fashion with Betadine and alcohol. Using the Teca Neurostimulator, the surface of the skin was electrically-stimulated until the motor point areas were located. These were then marked in the usual fashion. Then using a Teflon coated needle and again the neurostimulator, the motor point was again located. After careful aspiration, a total of 0.5 cc. of 8% phenol was injected into or around the motor points of the following muscles and nerves.

COMPLICATIONS OF PROCEDURE: None. Patient tolerated procedure well.

POST BLOCK EXAMINATION: Moderate reduction of tone.

RECOMMENDATIONS:

- 1. Ice to the injected areas for 20 minutes now and again this evening for 20 minutes for 24 hours.
- 2. Tylenol 650mg po q 4 hours prn for 24 hours for pain.

FOLLOW UP: 1-week.

		RIGHT # MPB	LEFT # MPB
Gastrocnemius	L5-S2	2	
Soleus Flexor Dig.	" S1-2	2 1	

REHABILITATION HOSPITAL PHYSICAL MEDICINE AND REHABILITATION

Nebraska

, M.D. M.D. , M.D.

PATIENT NAME: DATE:	4
---------------------	---

SPASTICITY MANAGEMENT CLINIC

SPASTICITY CLINIC EVALUATION AND PROCEDURE TODAY: Right APF permanent motor point blocks.

INDICATIONS: Reduction of severe tone.

NOTE: Versed 7 mg given IM prior to procedure for sedation.

PROCEDURAL NOTE: [] The procedure, all side effects, indications and contraindications were explained and a written consent was obtained from ______, the patient/guardian.

[x] Written consent is on file.

The skin overlying the right popliteal fossa was prepped in the usual sterile fashion with Betadine and alcohol. Using the Teca Neurostimulator, the surface of the skin was electrically stimulated until the motor point areas were located. These were then marked in the usual fashion. Then using a Teflon coated needle and again the neurostimulator, the motor point was again located. After careful aspiration, a total of 0.5 cc. of 8% phenol was injected into or around the motor points of the following muscles and nerves.

COMPLICATIONS OF PROCEDURE: None. Patient tolerated procedure well.

POST BLOCK EXAMINATION: Moderate reduction of tone.

RECOMMENDATIONS:

- 1. Ice to the injected areas for 20 minutes now and again this evening for 20 minutes for 24 hours.
- 2. Tylenol 650mg po q 4 hours prn for 24 hours for pain.

FOLLOW UP: 2-weeks.

		RIGHT # MPB	LEFT # MPB
Gastrocnemius	L5-S2	2	
Soleus Flexor Dig.	" S1-2	2 1	

CYSTOMETROGRAM/ELECTROMYOGRAM INTRA-ABDOMINAL PRESSURE MONITORING BLADDER EVALUATION ON:

AGE: 62

REFERRAL DIAGNOSIS: Traumatic brain injury.

HISTORY: is a 62-year old female with past medical history of motor vehicle accident on 194 and resultant traumatic brain injury, now referred for possible neurogenic bladder evaluation.

MEDICATIONS AT THIS TIME INCLUDE:

1. Pepcid 20 mg po bid.

2. Propulsid 10 mg po qid.

3. Multivitamin with Mineral 1 po q day.

BuSpar 5 mg po bid.
 Isopto Hyoscine 0.25% OD q day.
 Moban 25 mg bid.

PHYSICAL EXAMINATION:

Anal Wink: Brisk. BC-Reflex: Brisk

Cremasteric Reflex: N/A.

Voluntary Anal Sphincter Control: Moderate.

PROCEDURAL NOTE: Using the Inc. Urodynamics equipment for water cystometry and intra-abdominal pressure monitoring: a double lumen 16 gauge. French foley catheter was inserted into the bladder under sterile technique; a rectal balloon was inserted into the rectum for intra-abdominal pressure monitoring. A Teflon coated needle for concentric EMG was inserted into the external urethral sphincter and connected to the Teca Te-4 electromyography equipment.

EMG EVALUATION: Revealed in the external urethral sphincter: No

evidence of acute denervation seen.

Number of motor units per field: Normal. Amplitude: Normal.

Motor units: Normal, small.

Positive waves: None. Fibrillations: None.

Bizarre High Frequency Discharge: None.

Voluntary Contraction: Moderate. Voluntary Relaxation: Moderate.

DETRUSOR FUNCTION: At a rate of 15 cc. per minute of sterile normal saline, the patient's bladder was slowly filled. The patient had first sensation of filling at 250 cc.; first urge to void at 250 cc. Bladder contraction occurred at 275 cc. with relative pressures of 40-50 cm. of water pressure. Leakage around the catheter was none. The patient was able to suppress for approximately 1-minute. Maximum volume instilled was 300 cc.

REHABILITATION HOSPITAL CYSTOMETROGRAM/ELECTROMYOGRAM INTRA-ABDOMINAL PRESSURE MONITORING BLADDER EVALUATION ON: - 444 / 94 Page 2

EMG of the external urethral sphincter activity revealed: Normal response to filling and emptying.

IMPRESSION: Spastic detrusor with overlying cognitive impairment
predominating.

RECOMMENDATIONS: See orders in chart.

FOLLOW UP: 2-3 weeks.

, M.D.

DISCHARGE SUMMARY ON:

DATE OF ADMISSION:

DISCHARGE DATE:

94 (from Room Acute Rehab to home)

HISTORY OF PRESENT ILLNESS: 62-year old female was previously on the skilled unit for quite some time is now admitted to Rehabilitation Hospital. The patient was previously at Hospital following motor vehicle accident. Injuries included right cerebral contusion with subarachnoid hemorrhage, facial laceration, right retinal detachment, fracture of the left forearm. Her hospital course was complicated by pulmonary infiltrates, herpes simplex antigen was positive on bronchoscopy washings. She was treated with anti-viral agents. She required a tracheostomy insertion of percutaneous G-tube on 1994. She had a burn injury to anterior chest and her abdomen. She was sent up on the skilled unit where she was stabilized and felt to have achieved significant recovery to be able to participate in acute rehab program.

ALLERGIES: None.

REVIEW OF SYSTEMS: Patient does not respond to questions when asked about review of systems.

FAMILY HISTORY: Unavailable.

SOCIAL HISTORY: Apparently a non-smoker, otherwise unavailable.

PHYSICAL EXAMINATION: Alert female in no apparent distress. She is aphasic. Blood pressure 140/90. She is afebrile.

HEENT: PERRLA EOMs intact. Nasal pharynx clear. There is an incision area of the intracranial pressure monitoring noted to be dry and healed. Patient tracks on examination. She is aphasic except for counting. She does not answer questions.

NECK: Supple.

PULMONARY: Lungs clear to auscultation and percussion.

CARDIAC: RR S1 S2.

ABDOMEN: Soft and non-tender. Bowel sounds noted in all quadrants.

EXTREMITIES: Moves all 4 extremities to command. Has good range of motion noted about the plantar flexors but this was following a motor point block done yesterday. Some increased tone noted about the right lower extremity. Fairly good range of motion noted.

REHABILITATION HOSPITAL DISCHARGE SUMMARY ON: Page 2

HOSPITAL COURSE: Middle aged female with history of traumatic brain injury, retinal detachment admitted to Rehabilitation
Hospital. The patient was extremely agitated upon admission. She was put into a bed. Her agitation was controlled from a behavioral perspective as well as with prn Ativan. Patient began hallucinating. She was put on by She was also treated for agitation on a routine basis with Buspar. The patient made very good gains overall and she got to the point where she continued to have word finding difficulties, but was able to verbalize and had good automatic behavior. Tone was followed and motor point blocks were done as needed. She was confused during most of time on the acute rehab but toward the end of her stay was no longer hallucinating and off the Moban. She was also completely off the Ativan.

The patient was discharged in stable medical condition and will be followed up prn in the outpatient clinic.

, M.D. , M.D.

Rehabilitation Hospital

, Nebraska

CHANGE OF STATUS:

program at Rehabilitation Hospital (1994) from the complex medical and rehab unit. She has a medical diagnosis of traumatic brain injury secondary to motor vehicle accident. A CT scan indicated right frontal parietal and temporal hemorrhagic contusion with subarachnoid intraventricular hemorrhaging. She demonstrated characteristics associated with a Level IV on the Scale of Cognitive Functioning at the time of her transfer to the acute program.

THERAPY: continued to receive individual speech/language therapy and was enrolled in speech lab and orientation group. The focus of therapy was to improve orientation, attention and concentration, and expressive speech and language.

PROGRESS: made good progress in speech/language therapy. She currently demonstrates characteristics of a Level VI on the Scale of Cognitive Functioning. Receptively, she follows two- to three-step commands when given in sequential order. Her yes/no responses continue to be unreliable at times. She appears to have little difficulty with comprehension and concrete conversations.

is verbose and tangential, especially when she is anxious. Although she demonstrates moderate to severe word-finding deficits, she is beginning to use strategies with cues; i.e., naming items by function. She is able to complete very simple word-finding tasks with minimal cues.

complains of poor vision and wears glasses. She is able to complete simple reading and graphic tasks. Reading comprehension is accurate for the sentence level or for very short paragraphs. She demonstrates poor recall of written information. Graphically produces familiar and simple phrases and short sentences. Legibility is reduced, possibly due to visual spatial and acuity problems.

attends to 30-minute therapy sessions. Although she is perseverative, improvements have been noted in this area.

has improved greatly in orientation. She independently refers to her memory log for her schedule and other important information with minimal to moderate cues to locate correct information. She is oriented to date 100 percent of the time. The requires maximum cues for functional reasoning and problem-solving tasks.

presented with dysphagia issues when transferred to acute rehab. All swallowing has been resolved, and she eats independently with minimal supervision at the time of discharge.

STRENGTHS: has excellent family support. She was reported to be very appropriate and much more focused during home visits. She independently refers to her memory log for a variety of information. She remembers significant information for over a 24-hour period.

NEEDS: is moderately aphasic. Comprehension is concrete and expressive language is tangential and perseverative. She demonstrates poor memory skills for learning new information.

EQUIPMENT: was issued a memory log.

FAMILY TRAINING: husband, has attended therapies and rehabilitation meetings.

SUMMARY AND RECOMMENDATIONS: made good progress on acute rehab. She is moderately aphasic and demonstrates characteristics of a Level VI on the Scale of Cognitive Functioning. She comprehends concrete conversation. Her expressive language is characterized and tangential and perseverative. She demonstrates no dysphagia at this time. Motor speech is well within normal limits. She is discharged to live at home with her husband, in Nebraska. It is recommended that she continue to receive daily speech/language therapy with an emphasis on functional speech/language for the community environment.

LONG-TERM GOALS: (8-10 weeks)

- 1. Communicate wants/needs in community environment with semisupervision.
- 2. Cognitive linguistic skills to complete simple functional tasks in the home with semi-supervision.

SHORT-TERM GOALS: (2 weeks)

Page 2

1. Patient will continue to be oriented x 3 eighty percent of the

time with use of a memory log given minimal cues.

- 2. Patient will recall new information presented verbally or written following a 10- to 15-minute period one time per session.
- 3. Patient will complete a variety of sequencing activities with moderate cues; i.e., cards, steps to events.

MS, CCC-SLP

Rehabilitation Hospital

. Nebraska

DISCHARGE SUMMARY:

DISPOSITION: Patient discharges to home with husband with moderate assistance.

TREATMENT: Treatment provided included:

- 1. Cognitive-behavioral therapy five times per week.
- 2. Family therapy as needed.

SHORT-TERM GOALS: Patient met three of three short-term goals, including:

- 1. Patient improved her score on a sequencing task (ordering objects by size) from 18 percent to 36 percent.
- 2. Patient improved her score on a memory recall task from 0 percent to 68 percent.
- 3. Patient labeled actual objects with 80 percent accuracy. LONG-TERM GOALS: Patient met three of three long-term goals, including:
- 1. Sufficient mastery of compensatory skills to permit attainment or maximal approximation of the patient's identified aim.
- 2. Satisfactory emotional adjustment to the challenges and losses associated with the patient's situation.
- 3. Provision of sufficient education and encouragement to family or other relevant social supports to promote optimal patient and social network adjustment.

IMPRESSION: Patient discharges from cognitive-behavioral therapy with improved cognitive efficiency. She is emotionally stable at this time.

PATIENT/FAMILY TRAINING: Issues relevant to successful post discharge adjustment were explored with the patient/family/caregivers, including plans for patient's outpatient therapy program.

PATIENT/FAMILY GOAL AT DISCHARGE: Family hopes patient can regain as much functioning as possible.

RECOMMENDATIONS: Patient/family were encouraged to contact me as needed for follow-up or referral assistance.

DISPOSITION: Change of status to outpatient. First scheduled outpatient visit on 4.94.

, m. s.

, M.S.

, Ph.D.

Senior Psychologist Licensed Psychologist

Counselor

		OCCUPATIONAL THE	RAPY CHANGE ILITATION H			1
			and to different			· / 🎎 /
NAME	(4 (2)	ADMIT I	(Sarker	194 ONSE	DATE	/ /
DIAGNOSIS VI	A, Bices	e braicontro	sion, Su	-arochno	id /10	nonho
HISTORY burn.	to ant-ch	est & abdomen	,			·
PRECAUTIONS in	unulsine n	t times Etras	MJOAN T OM	ALL AGE 62	D.O.B	•
	′ ~		\mathcal{T} .			
HEMAVIOR: AI	LERT YES NO	IMPULSIVE -(res) no	RANCHO LOS	AMIGO	VI.
COMMENTS:						
FUNCTIONAL S	STATUS					
UE CARES	D			IND		
LE CARES	_		N/HOA SBA	IND		
Transfers-To Transfers-To			N/HOA (SBA)			
BED MOBILITY			N/BOA SBA			
	-		N BOA SEA	IND		
UE FUNCTION	WFI for	age,		•		
				-		···
VISUAL/PERCE	PTUAL/COGNIT	IVE PT CIONELY	الند تحت	sight wh	vich shi	seise
SBA and	ÖCRASIONA	1 HOA regula	id toll	It U to se	Atom	Luca
2 V bala	ace and c	agnitive ade	Licita (in	nemdry,	sique	odlige
Driving	Did Drive:	Yes, No Wisi	to Drive	Again: Ye	No No	0
CTHER						
UPPER EXTREMIT	TY FUNCTION:	(circle dominant	t upper ext:	remity)		
						,
TONE PROM	AROM MMT.	 		TONE	PROM	AROM
	LINI For not	Scapula: Eleva	tion	TORE	FROM	WAL
	14 / 15 i 1 / 1/1 / 1/1/1				 	THE STATE OF
		Protr	action		<u> </u>	K

		LUE						. KU		
ONE	PROM	AROM	MMT				TONE	PROM ·	AROM	MMT
		LDN!	For age	Scapula: E	levat	ion			WNL.	1000
			0	P	rotra	ction				W
				R	Retrac					1
				Shoulder:	Plax	0-180°				1
	1	1			Ext	0-45°				1
					Abd	0-180°				1
				Int Rot		0-90°				
		1		Ext Rct		0-90°				τ
		1		H. Abd		0-90°			1	1
				H. Add		0-45*				
~	T			Elbow:	Flex	0-150*				—
		1			Ext	0				1
	†			Forearm:	Sup	0-80°				 -
	t	1			Pro	0-80°				
	1	1 ,		Wrist:	Plex	0-80°			T	
	1	1			Ext	0-70°				 -
	1	1		Gross Ping	er Fl	ex				
				Gross Find	er Ex	t		·		1
		11/		Opposition	1			1	V	1

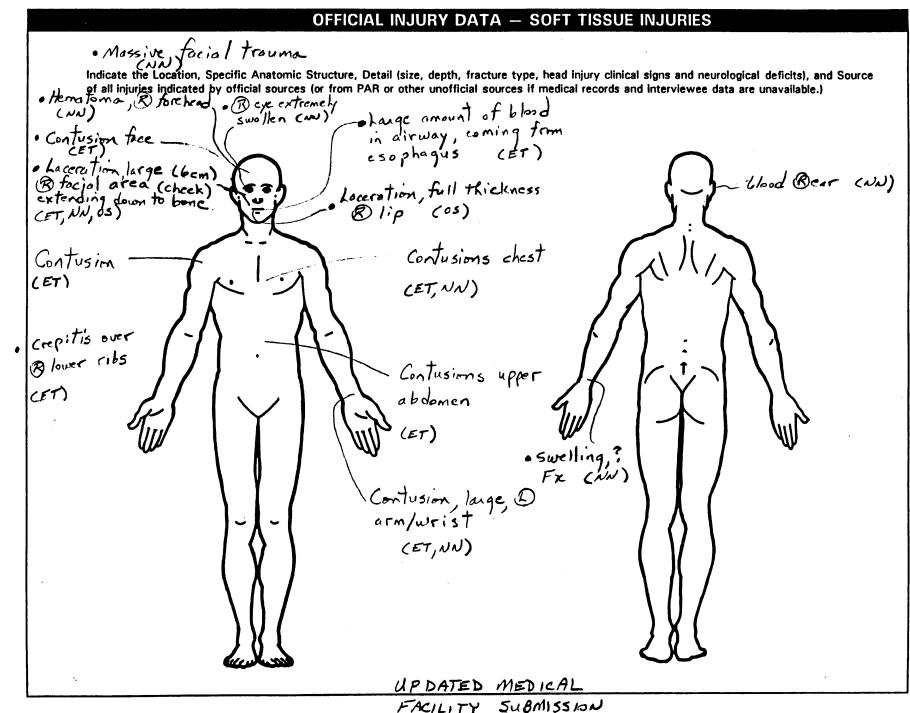
	LUE	COORDINATION	RUE			
	KT 3' ATY VIDO	9 Hole Peg Test	NT Z"	OFF V	ision	
	1 41 FL	Gross Control	WFL			
, , ,	Ave /	Gross Grasp	U		, Ave	
	`					
	,					

Page t	wo: Patient				
Rome I	enstruction:	Pt/ husba	nd encour	aged to on	ganize ptá
Family	() Training/Bd	ucation: Pfs	husband	has been	consort laste
Miona	on occa	seen + att	ended hom	e viset. He	in mare lit of
Equipm		Elastic Sox	physically walke	r Bath Hips	Knee Denturn
+	•	Laces	Aid Horn Ba		
	T'S PREFEREN		stated		·
	T'S STRENGTE T'S GOAL: +7	S/ABILITIES:-	amily suppl	at overall	trenth
			Pt cont to-	b.	+
ASSESS 3)	MENT OF PROG Number of re	RESS TO DAYS:	met status an	grake introv	per formance of tasks
- /	Program comp	leted: YES	NO (explain	Y Pt. refer	red to out at there
REEDS .	ASSESSMENT/R	ECONORRIDATIONS	FOR CONTINUED TR	RATHENT OF	kimization . Ef Skills!
1/	ADL skills		Feeding skills	REHABILITATION	DOTENTIAL
	RUE function		LUE functioning	Guarded	·
	Cognitive/Pe skills	rceptual	Field cut Judgement	Fair	
	Perseveratio	n'	Transfers	Excelle	
	Mobility S afety		(tub/toilet) Memory	Trial o	_
	Other				
OPER			•	.	
	Pain	Sp.	lint	Sling	
	Cast		osthesis	Braces	
OCCUPA	TIONAL THERA	PY PLAN			
	ADL retraini	ng	F	eeding training	
	increase upp	er extremity for	inction N	DT	
	Cognitive/pe Tub/toilet t	rceptual retrai ransfers		atient/family ed ome program	ucation
	Community re	integration	<u> </u>	daptive equipmen	
	Safety train Kitchen eval			ome assess/visit	•
	•	ity strengthen			
LONG T	ERM PROJECTI	ORS: (8-10 we	eks to supervised	e or cues	function)
- at v	vill realize	occ cues to 1	use compenser	my strategies	s in daily actinties
2.17	win realling	e occ. superin	sion in comp	Leting simple 1	ionemaking tasks
3. 51	ich is va	culming, di	ising and work	ing simple si	lonemaking tasks lacks
4.		_	·		
		(2 weeks)		·	
1. Pt.	will_require	frequent ve	rbai wes to	refer to men	long log for requested
4. H.	WILLITANIE	stipotoration w	the trespection re	real lace to con	puto siripo nemunum
4.	vill amria	ריסד אכעו טיי	omin with or	ic verifications	
					•
		·			4.1

BODY DIAGRAMS AND MEDICAL RECORDS FROM

UPDATED MEDICAL FACILITY SUBMISSION¹⁵

Specifically, these body diagrams are based on the medical records that this contractor subsequently obtained from the initial treatment medical facility; thus, these records are treated as an updated submission.



SOURCE OF INJURY DATA (61) Backlight storage rack, door, etc. (25) Left side window class or frame (26) Left side window glass including (62) Other rear object (specify): OFFICIAL one or more of the following: (1) Autopsy records with or without hospital/ frame, window sill, A (A1/A2)-piller, medical records EXTERIOR of OCCUPANT'S VEHICLE B-piller, or roof side rail. (2) Hospital/medical records other than (27) Other left side object (specify): (66) Hood emergency room (e.g., discharge (66) Outside hardware (e.g., outside summary) mirror, entenna) (28) Left side window sill (3) Emergency room records only (including (67) Other exterior surface or tires associated X-rays or other lab reports) (specify): RIGHT SIDE (4) Private physician, walk-in or emergency (68) Unknown extenor objects (30) Right side interior surface, clinic excluding hardware or armrests EXTERIOR OF OTHER MOTOR VEHICLE UNOFFICIAL (31) Right side hardware or armrest (32) Right A (A1/A2)-pillar (70) Front bumper (5) Lay coroner report (33) Right B-pillar (6) E.M.S. personnel (71) Hood edge (72) Other front of vehicle (specify): (34) Other right pillar (specify): (7) Interviewee (8) Other source (specify): (35) Right side window glass or frame 1731 Hood (9) Police (36) Right side window glass including (74) Hood omement (75) Windshield, roof rail, A-pillar one or more of the following: frame, window sill, A (A1/A2)-pillar, (76) Side surface **INJURY SOURCE** B-piller, or roof side rail. (77) Side mirrors FRONT (37) Other right side object (specify): (78) Other side protrusions (specify) (01) Windshield (38) Right side window sill (79) Rear surface (O2) Mirror (03) Sunvisor (80) Undercamage INTERIOR (81) Tires and wheels (04) Steering wheel rim Other exterior of other motor vehicle (05) Steering wheel hub/spoke (40) Seat, back support (06) Steering wheel (combination (41) Belt restraint webbing/buckle (specify): of codes 04 and 05) (42) Belt restraint B-pillar or door frame (07) Steering column, transmission attechment point (83) Unknown exterior of other motor vehicle (43) Other restraint system component selector lever, other attachment (specify):_ OTHER VEHICLE OR OBJECT IN THE (08) Add on equipment (e.g., CB, tape (44) Head restraint system deck, air conditioner) **ENVIRONMENT** (09) Left instrument panel and below (45) Air bag (use codes "16" and "17" for injuries (84) Ground sustained from air bag compartment covers) (10) Center instrument panel and below (85) Other vehicle or object (specify) (11) Right instrument penel and below (46) Other occupants (specify): (12) Glove compartment door (86) Unknown vehicle or object (13) Knee boister (47) Interior loose objects (14) Windshield including one or more (48) Child safety seat (specify): NONCONTACT INJURY of the following: front header, (90) Fire in vehicle A (A1/A2)-piller, instrument panel, (49) Other interior object (specify): (91) Flying glass mirror, or steering assembly (driver (92) Other noncontact injury source side only) (specify):_ (15) Windshield including one or more ROOF (93) Air bag exhaust gases (50) Front header of the following: front header, (97) Injured, unknown source A (A1/A2)-pillar, instrument panel, or (51) Rear header (52) Roof left side rail mirror (passenger side only) INJURY SOURCE CONFIDENCE (16) Driver side air bag compartment cover (53) Roof right side rail LEVEL (54) Roof or convertible ton (17) Passenger side air bag compartment cover (1) Certain (18) Windshield reinforced by exterior object Probable (specify): FLOOR (3) **Possible** (19) Other front object (specify): (56) Floor (including toe pan) Unknown (57) Floor or console mounted transmission lever, including LEFT SIDE console DIRECT/INDIRECT INJURY (20) Left side interior surface, (58) Parking brake handle (1) Direct contact injury excluding hardware or armrests (59) Foot controls including parking 121 Indirect contact injury (21) Left side hardware or armrest (3) Noncontact injury (22) Lett A (A1/A2)-pillar (7) Injured, unknown source (23) Left B-piller REAR (24) Other left pillar (specify): (60) Backlight (rear window) OCCUPANT INJURY CLASSIFICATION **Body Region** Specific Anatomic Structure Abbreviated Injury Scale Spine (02) Cervical (04) Thoracic (06) Lumbar Whole Area (02) Skin - Abrasion (04) Skin - Contusion Head (1) (2) Face (3) Neck

- Thorax
- (5) Abdomen
- Spine
 Upper Extremity (7)
- **Lower Extremity**
- Unspecified

Type of Anatomic Structure

- Whole Area
- (2) Vessels
- Organs (includes muscles/ ligaments) (4)
- (E)
- Skeletal (includes joints) Head - LOC (6)

- (06) Skin Lacuration (08) Skin Avusion

- (10) Amputation
- Burn (20)
- (30) Crush
- (40) Degloving (50) Injury NFS
- (90) Treuma, other than mechanical

- Head LOC (02) Length of LOC (04, 06, 08) Level of Consciousness

Vessels, Nerves, Organs, Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

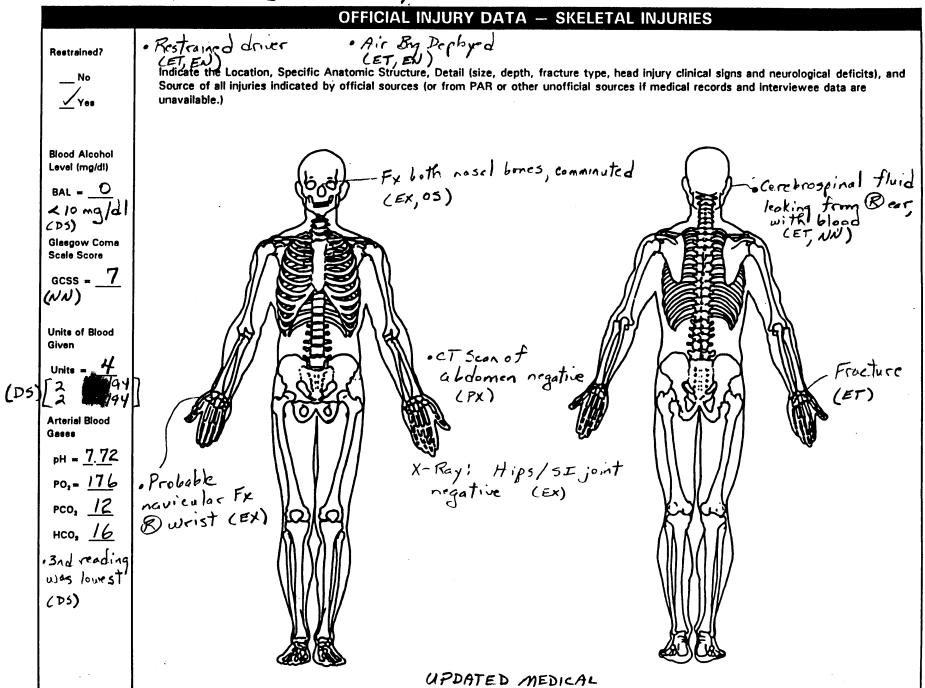
Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, OO is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

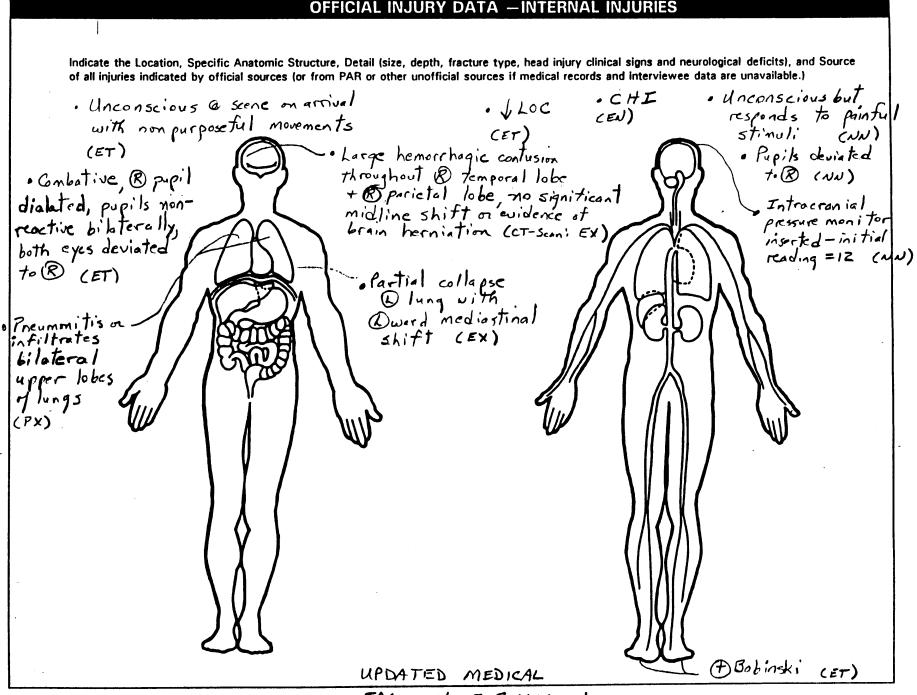
- Minor injury
- Moderate injury
- (3) Serious injury
- (4) Severe injury (5) Critical injury
- (6) Maximum (untrestable)
- (7) Injured, unknown severity

Aspect

- (1) Right
- Left Bilateral (3)
- Central
- (5) (6) Anterior
- **Posterior**
- (7)
- (8) Interior
- Unknown
- (0) Whole region



FACILITY SUBMISSION



FACILITY SUBMISSION

	AMDIN	ANCE !	DATIENT E	NCOUNTED E	ODM FORM	BEST A
11/91 EMS NO. AGE 6/2				NCOUNTER FO	S ALS CODE	
0,10000	CURRENT MED			O O I NEN O BL	s ALS) COU	-
1. Answer	MED ALLERGIE	S: NO	NE TUNK	_		
9 (1)	PICKUP LOCAT	10N:	VW.	HWY	Walcola	
5 Destinant Street	DISPATCHED A	S:	_	CHIEF COMPL		
	PAST MEDICAL	HISTORY	: Woknou	NEXT F	ROAL P CAST	TZAUN
10: Paralysis (J) 11: Westness (J) 12: Decreased Sensation			· ·	<u> </u>		
13. Absert Sensation 14. Decreased Pulse 15. Absert Pulse	ASSESSMENT: A	ward	To food	9 AT 50 4	KA 4 C-collec	/////
16. Parnal Thickness Burn 17 Full Thickness Burn 18.	E 000-		eful no	rement. pr		reassed
	dower of	A SO	rall rehid	te that	WENT Off A	n Ange
Area, Contrasions to fac	Aiches e	+ W	per Abo	1. Soorine	Resp. Z Inc	ve Ama
	CSE form		CAR Ab	- 4/ 1/		abred
SKIN PALE of dry, LIS chem	r = , chos	T W	7.FIL		piris on @	1suer
Palaned Pelvis inter	less int	ALT I	Barbens	. 0 11	+ bilare.	OArm/
wrist & large confusions.	er comb	ATIEN	0 1	A 1	/	ACHRI
borto eyes divinted tok	Jian long	exed.	TO INTEL	have while	0	TACTE
prospect & Valuer to	1 10	TAG	OF BE	0= 140 P.	TV STACTED	72 Aum +5
vialum your. Arrempt	CFT ASI	eln z	EULO	55. Sucrion	\ 1 +0 =	TO Un
IMPRESSIONS	No succe	ER DIA	JULITAN.	Je IV SH	rr-led, 185	ATTEMP
TIME PULSE BP RESP LOC	RHYTHM	TIME	-	TREATMENT/IV/MEDIC	CATION	EMT
/ A V P U						
/ AVPU	برح		Supple	mental		
/ A V P U			11			ļ
/ A V P U						
/ AVPU						
/ AVPU						
VEHICULAR TRAUMA PATIENT INFO.	SAFETY DEVICE:	ПМ	ON-VEHICULAR	TRAUMA	SEE SUPPLEME	NTAL FOR
Location of Patient in Vehicle Beyote Beyote	Unknown Unrestrained		Fall It. Penetrating	Overdose Near Drowning	RUN DATE	199
7 4	Air Bag D Shoulder Harness		Blunt Fire Aesault	D Farm Machinery Unknown	VEHICLE #	
□ Unknown □ Rollover	Child Safety Seat D Helmet C		EDICAL: ARDIAC ARRES	Ť	Time Call Received / I	/1되/
PUPILS D Equal TRAUMA SCORE	TREATMENT	_		SPLINTS	Time Unit	
	D Mask D Car	noute D	ORILIZATION Cervical Coller lead Immobilizer	☐ Rigid Splint ☐ Air Splint	Dispatched Time Unit	157
Nonreactive D Sportaneous 4 4	D Non-rebreaths D Mouth to Mouth D Oropherangeal		Short Spine Board ,ong Spine Board Sandbage	☐ Traction Splint ☐ Sling and Swathe ☐ Timmons	Arrive	<u>।श</u> ट
Constricted D None Cataract D Verbal Response	M ETTE A.5	9 .	UND CARE	D Pilow	Scene /	21017
Words or Phrases 4 4	D. Pocket Mask Suction D. Clear Obstructed A	8	Dry Storile Dressing Net Dressing	OTHER P.A.S.G. Extrication	Scene I	2119
SKIN Normal Gruns or Moons 2 2 None None C	D CPR D Bystander CPR		Occlusive Dressing Pressure Dressing Direct Pressure	Restraints Sterile Water	Peturn to	21812
D Cyanotic Deys Command 6 6 Coeys Command 5 5	Defibritation		ium Sheet ourniquet		Service /	3019
D Hot Pleasen 3	Patient's Nam				at Station	
None Scale Score 5.3	Address	•			Base Contacted /	21/17
CHEST Access	Date of Birth_		BSN			
R L Coma Scale Points D Raise D 13-15 4 4	Phone				Base Hospital_	
D Wheezes D 9-12 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Receiving Hos	pital	FR	_Dr.	Base Physician	
	Family Physic	ian	· .		Attendant	ID
>29	Relative	-				للا
None Sweeter Street Street Street	Incurence		P	none		'لَـلـــُــُــُــُــُــُــُــُــُــُــُــُـ
D RUO D LUO >80 104 D RLO D LLO 78-89 3 3 D Ried 50-75 2 2	Insurance				Total Miles	
Distended	Sincet :-		_		Trip Miles	
IOTAL SCORE 9 4	Signature		REMFO	D	Census Tract	

	-1-1		
Date		2	94
	NO.	Ü.	YA

NEBRASKA EMS PATIENT ENCOUNTER FORM SUPPLEMENT

PAGE#

PATIENT

2

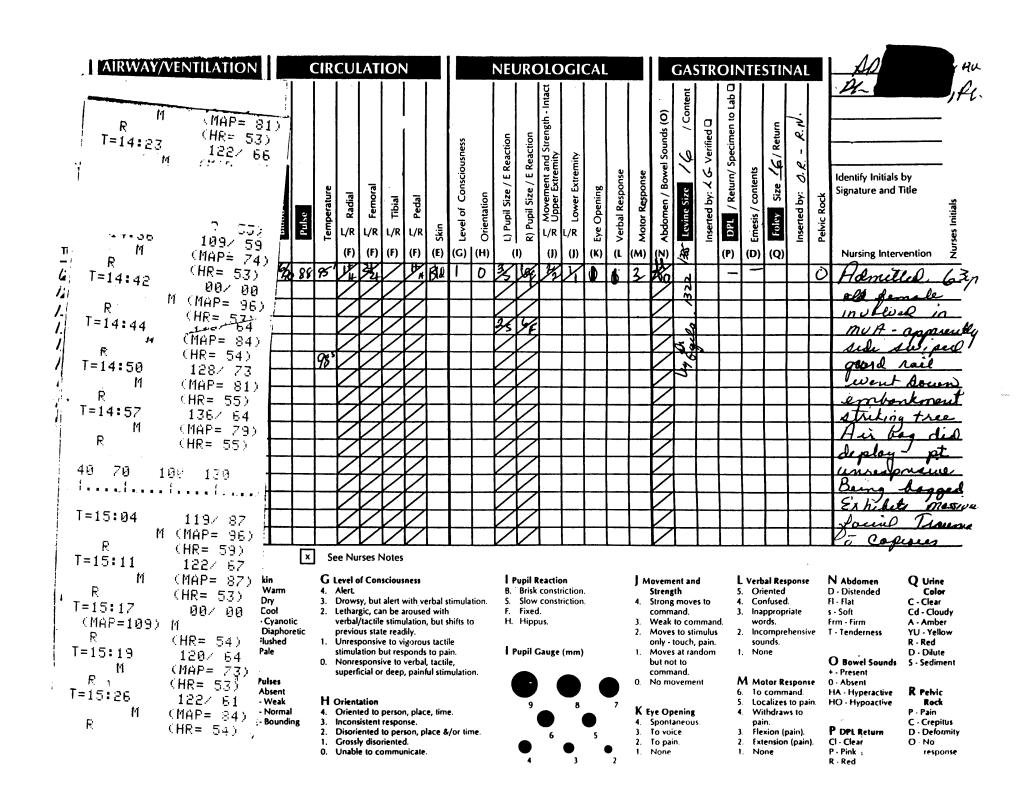
SQUAD: ____ RESCUE SERVICE: ____ **CONTROL #** TREATMENT / IV / MEDICATIONS PULSE ВР RESP **EMT** TIME LEVEL CONSC RHYTHM 140 P AIS T PE 80 10 A V PID 120B 199 140 IP ATTEMPT ETT 80 12 16 10 185 AVPU BASE COMMIT 1217 IV LRTKO AT14KARDAR BIO AVPU R < R 181 1218 185 1 Alium 5 m SAUP Blo 1218 A V P U AVPU ATTEMPT ETT 1219 AVPU Enroute 1220 80 | P IV W/O TO TITLATE TO BP BLA 1221 70 AVPU 1224 AVPU 12 25 AVPU 68 1226 AVPL AVPU 1230 1231 1021P D/24 68 AVPU 12 39 Arrived TOTAL 2400 CC LR $A V P \overline{(1)}$ 1242 AVPU COMMENTS: TO PLACE ETT but Surtrand by QUANTIES OF Blood ETT or verified. large Amount of Blocd in oral carlty coming from BP & to spen who. P 2000 LR infused BP: 102/18. The ared TO BP. P hyperventilated, surther = 200-300 " of blood. Arrived Blood ETT DIACED from Esophyus KEMT.P Signatures Attendant ID's

TRIAGE TIME: Nonurgent Urgent Enteremt Presenting Complaint:		HOSPITAL		□ Lav ⊓ □ Rape	ATION orcement crisis al Control
Mu A	neds Unk	3	Allergies		Tetanus Status
Date of Onset/Accident Chief Con	molaint/Mechanism Injury	J	Time T (Р	R- BP.
protocal - ien	A- Thereme	RN RN	17313	P 88	30 146/go R B/723/55
Time seen by physician HISTORY/PHYSICAL			ERP HP Lytes Glucose Amalyse UA Serum Preg. ABG Gardiae Profile		RESULTS
			Oximetry	- 54.7	
DIAGNOSIS			X-RAY (XR ABD Series C-Spine	777	RESULTS
			OTHER: feiris		
TREATMENT/INSTRUCTIONS			To X-Ray	Re	eturn
			EKG Resu	lts	
			NOTIFIED DOCT	OR:	TIME:
CONDITION ON DISCHARGE/TRANSFER: DIM	PROVED GOOD FAIR	□ SERIOUS □ CRITICAL			·
DESCRIPTION EMERGENCY ROOM PHYSICIAN SERVICE - DEPT. 2050 RW	DISCHARGE SUMMARY: Improved [Alert / Oriented METHOD OF DISCHARGE	☐ Unchanged ☐ CMS Extremity good ¡E:	, —		e de la companya de l
Attending Prostosia	Crutches [ACCOMPANIED BY:	☐ Wheelchair ☐ Carried ☐ Ambulance ☐ Law Entorcement			1 1 1 1 1 1 1 1 1 1

OCCURRENCE	FA	MILY NOTIFIED	Last	Meal: Time	<u>k</u>	
Date:	Time:/240Ye	es 🗗 Personhu	shoul. Cont	ent:		
* /-	N	Other 🗆	weig	sht	Actual/Stated Unknown	٥
Past Medical Histo	r. cenks	wwn			☐ None Available	:
Mechanism Injury:	_	,				_
1240 f	7 broug	ht in ky		- MUA-	Sleent	
Tracema	La	in lace	utim -	OHT-	CSF. from	
Rleau	- Bie	· lacecat	ion to	RIcheek	- Spindl fluid	_
Swell	leave to	LI Lorean	- 0055	leo de-	? perus Lo	_
Continu	CAAA	Chest	massive	0	Telegran	_
	RN.		7710-2200	Jama		_
	Rentique	2 driver		1 1	<u> </u>	-
SEVERITY SCORE		/isua lAcuity	IMMOBILIZATIO	nog deplays	E.S. VALUABLE CHECKLIST	_
	Dismissal	risua faculty	PTA ES,)N		
	from E.S.		X X C-Collar Spine Boa	ards	☐ Belt ☐ Partial Plat ☐ Bra ☐ Purse ☐	te
Admission	<u></u>		X X Sand Bag		Cane Cangs 2	ĸ
Glascow Coma Sc Eye opening	ale	L R	Splint		□ Coat □ Robe □ Contacts □ Scarf	
4 Spontaneous					☐ Corsette ☐ Shirt	
3 To voice	- 9_	_ ^	_		☐ Dentures,U,L ☐ Shoes ☐ Dress ☐ Slacks	
2To pain 1None		7 Y		1. 1° burn 2. 2° burn	☐ Dress ☐ Slacks ☐ Slacks ☐ Slip	
Verbal Response	<u> </u>	م) سا لا نبط	\ \ \	3. 3° burn	☐ Glasses ☐ Slippers	
5 Oriented	_	70) (4. Avulsion 5. Abrasion	☐ Gloves ☐ Socks	
4 Confused		10		6. Laceration	☐ Hat ☐ Suitcase ☐ Suspenders	_
3Inappro. words 2Incompr. words		1/0	/. l .\	7. Puncture	☐ Keys ☐ Sweater	•
1 None	$\stackrel{\mathcal{L}}{=}$ 100	317	/	8. Contusion 9. Swelling	☐ Money \$ ☐ T-shirt	
Motor Response) X-	M7	//	10. Ecchymosis	Medication	s
6 Obeys cmmnds 5 Localizes	— ///	- 1/1/ /	77 1 111	11. Absent Pulse 12. Decreased Pulse	□ Necklace □ Vest □ Nightgown □ Walker	
4 Withdraws	-/ 1//	VIOX I	// , \\\	13. Absent Sensation	☐ Nylons ☐ Wallet	
3 Abnormal flex				14. Decreased Sensation	☐ Pajamas ☐ Watch	
2 Abnormal exten	— W \	Y) " EW	1-7-1 W	15. Paralysis	-, not	,
1 None_ Respiratory Effort	_ \	$\Lambda \Lambda$	$A \cap A \cap A$	16. Weakness 17. Pain	DESTINATION ()	
Normal	>) (1 / 1 /	18. Dislocation	Valuables sent: With Family To OR	
Shalldwitherract. Capillary Refill		11 (1111	19. Deformity 20. Fracture	O With Friend To Safe	
∠Normai		<i>/\ /</i>	1 1 1 1	21. Sprain/Strain	☐ With Friend ☐ To Safe ☐ With Police ☐ No Clother	:5
 ✓ Delayed]] (1111	22. Rash 23	16 To Floor ✓ Cut Off	
Absent	_ /	, (\	رادا ایک	6.5. <u></u>	RESTRAINTS Yes No Unk	i.
	V	V		Location in Vehicle:	Helmet	•
Total GCS	(R)	(L)	(L) (R)	Location in venicle.	Lap Belt X	-
	` ,	\- /			Shoulder Belt X	-
NURSING SAFETY II		RECAUTIONS		σ	Child Restraint	_
Cart	☐ Wrist restraints	☐ Wounds cleansed wit	h <u>Velaline</u>		Air Bag Y	_
□ Held	☐ Waist restraints ☐ Padded side rails	☐ Trendelenberg ☐ Head of bed elevated	degrees	19	Doctor Time Next of Active	_
☐ Suicide precaution	Ø Warm blanket. ¥ €	0	iced/elevated	Ĭ ¥Ĭ-ŢŢ	Doctor Time Notified Arrived	
☐ Call light ☐ Procedure explained	☐ Infrared lights☐ Seizure precautions	☐ Isolation		(1)	140	
☐ Reassurance	Q Seizure precautions				142	

EMERGENCY SERVICE ADMISSION NURSES NOTES





PAIN	ASSES	SSME	NT										No Pa	in Se	vere	1 NILIDSING INTERVENITION
 Ti	me	Lev	el	Lo	cation	Quality	Intervention		Res	ults		LEVEL: QUALII	0	-	10	NURSING INTERVENTION
13	65		_be	ne	whish	egio	3 mg n	,] `	QUALII	À	Burnin Aching	Š	la la to
130	25				11	//	5 my M				1		S SH	Stabbii Sharp	•	la laceration to Richard
134	N				41	<i>"</i>	5 my M.	1			1		T C	Throbb Crushi		Li Tillaco
					1.4	-/ \	Jing III.	ᅴ			1		T ₁	Tightne Pressu	ess	from Blogs.
 -				22	roctly	yeu					F	RESULT		Compl	ete relief	Kleye extremely
L		·			تسمر	ksenera			**********		j		DI	Decrea inten	sity	swellen - plipils
													NR	/ No reli	ef	deviated to R) (see
	Carro						1									aroshie). Also
	Start	T		ij	Нуре	Solution, ralimentation,	IV Additives	1		Method			Discontin	ue	Total	a bilit continue
Dage	Time	Nurse Init	Started			min, Blood, od Products	IV Piggybacks IV Pushes		₩ Rate	and Gauge	Site	Date	Time	Nurse Init		A. t
4	1243	120		lo	oa L	R		\sqcap	150/1		HANT	1	1		 	11.l.
1 3 i	1503	fu	4)			LR.		11	18/4	 	I	1	1305		3500	Aforearn of rebel
	1305		1000 cc	T^{-1}		2 (††	14	18	RIAN	1	1257		10000	- Swelling + lg new
		ì		\top		R Wan	<i>ر به</i> عب	╁┼		1 1	HANT	1	1410		10000	of eachymans?
	2257		1000cc	╁		- K Woir	red)	╁┼	OPER	<u> </u>	RIAM	46				deformity of wriet
	1340	1/	2500		RIA WON		cells	\sqcup	OPER C	4 11	RHM	6/6	1440		25000	Trauma Sistacal
	1340	T .	2500	4_	Bld wou	m packa	dalle	\coprod	open	"	LIND	6/6	1505		25000	initiated -
	1310		50c	\bot		Ance	17 Gm	Ш	JUPE	3 11	RIAd	4/6	1345	i	5000	C. Callar removed by
	·			\perp												Bn 12/8"
	· ·							П								n.a enserted by
								П								
				П				Π	<u> </u>	1						P. (732)
				Ħ				H				-	 	-		It to C/ you
				H				╁┼		 		 	 -			head a abdomeniel
				H				╂┼		 	 	 				Oscios. V.S semain
				\dashv				\coprod	-	 	 	 	<u> </u>			Stoke - pt remains
		 		igspace				Ш			<u> </u>	<u> </u>				astrendero.
				Ц				Ш				1				
								\prod								
	Medic	cations		Sit	e Route	Time Sign	nature Intake:		<u> </u>	-			`~			1
1	4	0.5	C. T		Dn	1315	manc.	Oral	<u>\$</u>	(Dutput: E	mesis _ Jrine _				
					100	75.5		Bloo	d_211	nets:	L	evine _	1000	dk	He.	
												Chest tu				

ι____

EMERGENCY SERVICE ADMISSION NURSES NOTES

Time	B/P	Р	Nursing Intervention	Time	B/P	Р	Nursing Intervention
1430	Br	Ae	re - enserted				
···	ICR -	. ini	test reading	·			
	12.	of for	head hamaloma				
	facial	lacer	tion repaired				
	ley On						
	Pt conil	inues.	to blood	 			
	NG d	1/1ares	de sea				
	dearnag	e	ne				
		· · · · · · · · · · · · · · · · · · ·					
		*			-		
Discharg	e Summary: T	īme:	B/P 124 P 54	R is half	Pertinent Actual Po	Nursing	Diagnosis
1540	P+ &	tarsfe	toff - Right	Pak			Ineffective airway clearance Potential for aspiration Ineffective breathing pattern Impaired gas exchange
	5 Vent	ectop	y. It Jugar	usele.			Altered cardiac output Altered tissue perfusion Impaired mobility
	in the state of th	R	e) lighter ses	Asree,		0	Alteration in comfort Sensory perceptual alteration
Report g	iven to:		RW			0	Hypothermia Hyperthermia Other
Keport 8	iven to:		KW			u	Other

PATIENT#: MR/ACCT#: DR#:



NAME: AGE: DOCTOR:

62Y SEX: F ROOM:

*	******		******	ARTERIAL B	OOD CACEC	******	*****	
DATE: TIME:	NORMAL	UNITS	[1752	/94 2010	2105] []	94]
рН	7.35-7.45	Units	7.35	7.67 * (a)	7.72 * (b)	7.42	7.61 * (c)	7.60 * (d)
pC02	32-45	mmHg	30 *	16 * (a)	(e) 12 * (b)	31 *	19 * (c)	19 * (d)
PO2	70-100	mmHg	89	453 *	(b) 176 *	105 *	81	100
O2SAT CALC CO2 BICARB CO2 DELTA O2/APPLIANCE SOURCE BAR.PRES.	95-98 21-27 21-28	% mM/L mM/L -/-3 mM/L mmHq	97 18 * 17 * NEG 7 UNKNOWN ART.P 724	100 * 19 * 19 * 2 100% ART:P 725	100 * 16 * 16 * 16 * 40% ART.LN 725	98 21 20 * NEG 2 40% ART.LN 726	98 20 * 19 * 1 35% ART.LN 727	99 * 20 * 19 * 1 35% ART.LN 731
VENT. MODE VT		cc		(f) 800	(g) 800	SIMV 15	SIMV 800	-SIMV 12
-				ARTERIAL BI	OOD GASES			· · -
DATE: TIME:	NORMAL	UNITS	0925	794] 1120	0600	0555	94	94
pH .	7.35-7.45	Units	7.55 *	7.47 *	7.48 *	7.46 *	7.49 *	7.42
pC02 P02	32-45 70-100	mmHg mmHg	(h) 21 * 112 *	30 * 94	33 64 *	38 86	33 73	39 81
O2SAT CALC CO2 BICARB CO2 DELTA O2/APPLIANCE SOURCE BAR.PRES.	95-98 21-27 21-28 +	mM/L mM/L /-3 mM/L /-3 mM/L	99 * 20 * 19 * NEG 1 35% ART.LN 731	98 23 22 0 35% ART.LN 727	94 * 25 24 25 35% ART.LN 733	97 28 * 27 4 35% ART.LN 734	96 27 26 3 35% ART.LN 735	96 27 26 35% ART.LN 731
VENT. MODE		CC	SIMV 12 800	SIMV 8 800	SIMV 8 800	SIMV 8	(i)	SIMV 8 800

		-LOOINOIF2						
į	(a)	ALERT	CALLED	TO (AT 1	1800	B
1	a b c	ALERT	CALLED	TO	AT	2015	BY	
1	(c)	PANTC	VALUE	וא חיז	TIRSE (1		

det gri

PANIC VALUE TO NURSE
ALERT CALLED TO AT 0935 BY
DONE AT NO CHARGE TO PATIENT/
VOLUME CONTROL
VOLUME CONTROL 15
SPECIMEN RUN ON ALTERNATE INSTRUMENT AT NO CHARGE.
PRESSURE SUPPORT 15

PATIENT#: MR/ACCT#: DR#: ADMIT: DISMISS:



NAME: AGE: DOCTOR: 62Y SEX: F ROOM:

-			A	RTERIAL BI	JOOD GASES			
DATE: TIME:	NORMAL	UNITS	0558	0558	0603	0602	0555.	94] 2240
pH pCO2 PO2	7.35-7.45 32-45 70-100	`Units mmHg mmHg	7.46 * 41 68 *	7.49 * 38 64 *	7.49 * 34 106 *	7.47 * 32 109 *	7.49 * 32 83	7.47 * 33 99
O2SAT CALC CO2 BICARB CO2 DELTA O2/APPLIANCE SOURCE BAR.PRES.		# MM/L MM/L +/-3 MM/L mmHg	94 * 31 * 30 * 6 30% ART P 726	94 * 31 * 30 * 6 35% ART.P 721	99 * 27 26 3 35% ART.P 732	99 * 25 24 1 35% ART.P 735	97 25 25 25 35% ART.P 733	98 25 24 2 35% ART . P 733
VENT. MODE VT PS		CC CmH2O	SIMV 8	SIMV 800	SIMV 800 10	SIMV 10 800 10	SIMV10 800 10	(j) 800 10

DATE:
TIME: NORMAL UNITS 0620 1608

pH pCO2 PO2	7.35-7.45 32-45 70-100	Units mmHg mmHg	7.47 * 34 113 *	7.50 * 32 70
O2SAT CALC CO2 BICARB CO2 DELTA O2/APPLIANCE		% mM/L mM/L +/-3 mM/L	99 * 26 25 2 35%	95 26 25 3 (k)
SOURCE BAR.PRES.		mmHg	ART.P 733	ART.P 726
VENT. MODE VT PEEP PS		CC CMH20 CMH20	(1) 800 5 10	

---FOOTNOTES--(j) SIMV RATE 8
(k) 35% T PIECE
(1) SIMV+PRESSURE SUPPORT

HOSPITAL - Lincoln



PATIENT#: MR/ACCT#: DR#:

NAME: AGE: 62Y SEX: F ROOM: DOCTOR:

ALCOHOL, BLOOD mg/d1 <10

7/94 1245

<10

CONTINUED

ROOM:

PAGE 17 DISCHARGE SUMMARY

	ENT#: CCT#: DR#:	ADMIT: //94 DISMISS: //94	NAME: AGE: 62Y SEX: F DOCTOR:	ROOM:
TEST:	**************************************	** PATIENT ABO/Rh AND AN Plasma/Serum Antibody Screen	Scre	een for ntibodies
794 245 794 1545	AB NEGATIVE AB NEGATIVE	NEGATIVE NEGATIVE	NEGA	ATIVE
TEST:	Component Ordere	DICCO DAME RECORDED TO	R TRANSFUSION ***** Order Expires	*******
(94 245 194 545	RED CELLS	4 02		
- / / / / / / / / / / / / / / / / / / /	TYPE & SCREEN PR	TRANSFUSION AND CROS		
	NOTE:	SCREEN PRO	ROSSMATCHED BECA TOCOL WAS CONVER ON PHYSICIAN'S	TED TO TYPE AND
94	**************************************	WHOLE BLOOD AND FACKE		ents/Antigens
1327 7 794	PC-AD PC-AD	AB NEG COMPAT AB NEG COMPAT	TRANSFUSED TRANSFUSED	
1512	PC-AD PC-AD	AB NEG COMPAT AB NEG COMPAT	TRANSFUSED TRANSFUSED	
	**************************************	WHOLE BLOOD AND PACKED nits Crossmatched 2	CELLS RELEASED **** Units Screened 0	No. Antigens

ORDERING MD: REFERRING MD: MD

DOB:
ID#:
ROOM:

DATE: 74

ORDER #: 📆

EXAM: CERVICAL, SURVEY, PORTABLE

CLINICAL DATA: Trauma 4 94

CERVICAL SURVEY, (PORTABLE) 194 AT 1249 HOURS: Multiple views of the cervical spine are not optimal because of the patient's inability to be still, but show no suggestion of gross fracture or subluxation. Some degenerative change is appreciated. There is fair maintenance of disc space and vertebral body height.

CHEST (CHEST): Portable 4.794 at 1303 hours: A film of the chest shows ET tube in place, probably down the right mainstem bronchus. There is partial collapse of the left lung and shift to mediastinal structures to that side. Osseous structures are demineralized and show degenerative change of the thoracic spine.

CHEST (Fortable 794 at 1315 hours. A film of the chest shows a better position of the ET tube with better aeration of the left lung. No pneumo or hemothorax seen. Heart size appears to be upper limits of normal.

LEFT FOREARM (): Fortable 94 at 1303 hours. Osseous structures appear demineralized and the probability of a fracture of the navicular is real. When possible more routine detailed views would be appropriate.

FELVIS, SURVEY (Portable 74 at 1305 hours. A film of the pelvis shows Shenton's lines to be symmetrical. No suggestion of fracture or dislocation deformity of either hip apparent. SI joints are unremarkable.

IMPRESSION: Chest showing ET tube in the right mainstem bronchus producing poor aeration of the left lung. Tube is then adjusted and improved aeration of the left lung is apparent. Heart size upper limits of normal. Cervical spine survey showing demineralization and degenerative change. No definite fracture or subluxation. Probable navicular fracture of the right wrist. Pelvis shows demineralization and some degenerative change.

TIME: 1500

DOB:

ORDERING MD: REFERRING MD:

MD

ROOM: ER

ORDER # 1

EXAM: CT HEAD WITHOUT CONTRAST

cc: Dr.

CLINICAL DATA: Motor vehicle accident



CT HEAD WITHOUT CONTRAST: CT of the brain was done without contrast. There is a large area of soft tissue swelling and hematoma over the right frontal calvarium. Fractures of both nasal bones are present. The zygomatic arches appear intact. There may be medial wall maxillary fractures on the left as there is a little fluid in the maxillary sinus on the left side. No other calvarial fractures are seen. There appears to be diffuse hemorrhagic contusion throughout the right temporal lobe and much of the right parietal lobe. There is effacement of the sulci throughout this region. There is not significant midline shift at this time or evidence of brain herniation. Small amounts of fresh blood are present in both lateral ventricles. The ventricles themselves are normal in size and position. There is no evidence of subdural or epidural hematoma at this time.

IMPRESSION: There is a very large hemorrhagic contusion throughout the right temporal and parietal lobes. Nasal bone fractures are present with possible medial wall fractures in the left maxillary sinus. No evidence of brain herniation at this time.

TIME: 1400 bb 44 94

DOB:

ORDERING MD: REFERRING MD: ROOM:

DATE:

4 11 TH

ORDER #:

EXAM: C.T.ABDOMEN & PELVIS

cc: Drs.

CLINICAL DATA:

Trauma. MVA



MD

CT OF THE ABDOMEN AND PELVIS WITH CONTRAST: Imaging is accomplished from the diaphragm through the pelvis after administration of contrast material showing what appears to be a liver and spleen which are intact. The density of the liver is comparable to that of the spleen. The kidneys function showing no hydronephrosis or extravasation of contrast. Arteriosclerotic change of the abdominal aorta is apparent. Psoas muscles are symmetrical. No retroperitoneal bleed is appreciated. The uterus is pretty full and has some low density material within its center. Possibility of fibroid formation to be considered. No pelvic hematoma is appreciated. The bladder appears intact.

IMPRESSION: CT of the abdomen and pelvis showing no retroperitoneal bleed with what appears to be intact liver and spleen. The uterus is large. Possibility of fibroid formation but an adenocarcinoma of the endometrium could present in a similar manner.

TIME: 0900

mf Ø4 94

M.D.

DOB:

ID#: ROOM: MD ORDERING MD: DATE: REFERRING MD: ORDER #: EXAM: CHEST, SINGLE, PORTABL CLINICAL DATA: Trauma with MVA CHEST (PORTABLE): Ø535 hours. A portable view of the chest shows heart to be within normal limits. There is probably some consolidation posterior to the heart. NG tube in place. ET tube in place at the carina. Remainder of the left lung and right lung appear clear. IMPRESSION: Chest showing what appears to be consolidation left lower lobe since prior examination # 94. Tubes in satisfactory positions. TIME: ØBØØ DOB: PATIENT: ID#: ROOM: MD ORDERING MD: DATE: REFERRING MD: ORDER #: EXAM: CHEST, SINGLE, FORTÄBLE

PATIENT:

CLINICAL DATA: Checking central line placement.

CHEST (PORTABLE) 34 94 AT Ø8Ø5 HOURS: A film of the chest taken with the mobile unit shows NG tube in place. A central line has been inserted from the right, the tip is just above the right atrium. Lungs appear about as before with continued density posterior to the heart on the left suggesting consolidation or atelectasis.

IMPRESSION: Successful placement of central line from the right. pneumo or hemothorax seen. Chest otherwise appears as before on earlier filming this date.

TIME: 0900

0

PATIENT:

DOB:

ORDERING MD: REFERRING MD:

MD

ROOM: DATE:

ORDER #:

EXAM: CHEST, SINGLE, PORTABLE

CLINICAL DATA: Progress chest. Multiple trauma from MVA on -94.

PORTABLE CHEST: A portable chest 194 at 0550 hours shows a normal heart and mediastinum. An endotracheal tube, nasogastric tube and subclavian catheter are in satisfactory position. The heart appears normal. There is developing infiltrative change in the right upper lobe.

IMPRESSION: Developing pneumonitis right upper lobe. I cannot see any consolidation in the left base on today's film. The tubes remain in satisfactory position though the proximal side hole in the nasogastric tube is at the cardioesophageal junction.

TIME: 0 99

M.D.

PATIENT:

DOB: ID#:

ORDERING MD:

ROOM:

REFERRING MD:

DATE:

ORDER #: EXAM: CHEST, SINGLE, PORTABLE

CLINICAL DATA: MVA 4794.

PORTABLE CHEST: A portable chest \$10.794 at Ø545 hours shows mild increase in density behind the left heart border and a little increase in the density previously noted in the right apex. The heart size remains normal. The tubes remain in good position.

IMPRESSION: Recurring atelectic change left lower lobe and slight increase in contusion and/or pneumonitis right upper lobe.

MD

TIME: ØBØØ

PATIENT: MD ORDERING MD: REFERRING MD: EXAM: CHEST, SINGLE, PORTABLE ORDER #: 94, follow up. MVA trauma on CLINICAL DATA: Ø53Ø hours. CHEST, SINGLE (PORTABLE): A film of the chest taken with the mobile unit shows NG tube in place. ET tube is approximately 2 inches above the carina. Subclavian catheter is in place having been introduced from the right. infiltrate noted in the right upper lobe with some prominence of markings adjacent to the left hilum. IMPRESSION: Patchy infiltrate, right upper labe appears a little more extensive than on the prior examination of \$2.74. Tubes in satisfactory position. Some accentuation of perihilar markings on the

M.D.

A patchy

PATIENT:

left. TIME: ØZØØ

ORDERING MD: REFERRING MD: MD

DOB: ID#: ROOM:

DOB:

ID#:

ROOM:

DATE:

DATE:

ORDER #: EXAM: CHEST, SINGLE, PORTABLE

CLINICAL DATA: Follow up.

CHEST (PORTABLE) SINGLE: Ø53Ø hours.

A film of the chest taken with the mobile unit continues to show bilateral parenchymal abnormalities in the upper lobes similar to that seen on previous examination of -94. Tubes appear to be in satisfactory positions.

IMPRESSION: Chest showing little change since the prior examination

TIME: TIØØ

MD

DOB: ID#:

ORDERING MD: REFERRING MD:

ROOM:

DATE:

ORDER #: EXAM: CHEST, SINGLE, PORTABLE

CLINICAL DATA: Frogress chest.

CHEST, SINGLE, PORTABLE: 94. Ø61Ø hours. A portable chest 94 at 0610 hours shows a normal heart and mediastinum. There is increased density behind the heart and patchy areas of infiltrative change are seen in the right upper lobe and left upper lobe. The latter have increased slightly from the previous The endotracheal tube, nasogastric tube, and right subclavian catheter remain in good position.

IMPRESSION: Bilateral upper lobe pneumonia. Question small consolidation or fluid collection behind the left heart border. TIME: Ø8ØØ

M.D.

PATIENT:

DOB: ID#:

ORDERING MD: REFERRING MD: MD

ROOM: DATE:

ORDER #: EXAM: ABDOMEN, SURVEY, PORTABLE

CLINICAL DATA:

Post trauma on 200794.

Question bowel obstruction.

ABDOMEN SURVEY, PORTABLE (A supine view of the abdomen was done with the portable unit. The bowel gas pattern shows a mild ileus but no focal obstruction is evident. A nasogastric tube is in place. No free air is seen. The bony structures are unremarkable.

IMPRESSION: Mild ileus.

CHEST, SINGLE, FORTABLE (A portable view of the chest -94 at 0520 hours shows a normal heart and mediastinum. There are bilateral infiltrative changes present in the lungs. These have not changed from yesterday's film. The tubes remain in good position.

IMPRESSION: Bilateral pulmonary infiltrates, unchanged.

TIME: 0800

DOB: ID#:

ORDERING MD: REFERRING MD:

ROOM: DATE:

ORDER #: EXAM: CHEST, SINGLE, PORTABLE

CLINICAL DATA: Progress chest.

PORTABLE CHEST 44 AT 1450 HOURS: Shows a normal heart and mediastinum. Diffused pulmonary infiltrative changes are again noted. This film was taken post bronchoscopy and there is no evidence of pneumothorax. The tubes remain in good position.

MD

IMPRESSION: Diffused pulmonary infiltrates, unchanged. Tubes are in good position. Negative for pneumothorax post bronchoscopy.

TIME: 1600

M.D.

PATIENT:

DOB: ID#:

ORDERING MD:

MD

ROOM:

REFERRING MD:

DATE:

ORDER #: EXAM: CHEST, SINGLE, PORTABLE

CLINICAL DATA: Follow up lung status. Patient is pre-op.

CHEST (PORTABLE) 74 at 1045 hours: A film of the chest taken with the mobile unit shows less pulmonary vascular congestion when about a centimeter above the carina. NG tube is within the stomach and a subclavian catheter is in place on the right.

Improved aeration of the upper lobes of the lungs since IMPRESSION: prior examination -94. Tubes in satisfactory position.

Report called to Dr. by Dr. at 1100 hours.

TIME: 1100 nij

${\sf R}$
A D
U
į
0
0 L
O
LOGY
G
Y
_
C
O
CONSULE
S
Ŭ
L
U
A
T
T [
0
_

DOB: PATIENT: ID#: ROOM: MD ORDERING MD: DATE: REFERRING MD: ORDER #: EXAM: CHEST, SINGLE, PORTABLE CLINICAL DATA: Follow up tracheotomy insertion. CHEST (PORTABLE) -94 at 1420 hours: A film of the chest taken with the mobile unit shows a tracheostomy device in place which appears to be in good position and alignment. Prominent markings in the upper lobes again are noted as on prior examination of IMPRESSION: Chest showing successful placement of tracheostomy device. TIME: 1600 M.D. riij DOB: PATIENT: ID#: MD ROOM: ORDERING MD: DATE: REFERRING MD: ORDER #: EXAM: CHEST, SINGLE, PORTABLE CLINICAL DATA: Progress chest. CHEST (PORTABLE) 94 AT 0540 hours shows a normal heart and mediastinum. The tracheostomy tube is in good position. There is continued improvement in the infiltrative changes in the lungs. Mild infiltration persists in both upper and mid lung regions.

IMPRESSION: Continued improvement in the chest.

TIME: 0700 nij 94

M.D.

•

DOB: PATIENT: ID#: ROOM: ORDERING MD: MD REFERRING MD: DATE: EXAM: CHEST, SINGLE, PORTABLE ORDER #: CLINICAL DATA: Progress chest. PORTABLE CHEST # 94 AT 0800 HOURS: Shows a normal heart and mediastinum. The tracheostomy tube and right subclavian catheter are in good position. The mild residual infiltrative changes still present in the upper lobes appear to be slowly improving. IMPRESSION: Continued slow improvement in the chest. TIME: 1000

PATIENT:

ORDERING MD:

CLINICAL DATA:

REFERRING MD:

MD

DOB: ID#: ROOM:

DATE:

ORDER #: EXAM: CHEST, SINGLE, PORTABLE

M.D.

Follow-up.

CHEST(PORTABLE): # 94. Ø53Ø hours. A film of the chest taken with the mobile unit shows tracheostomy device in place as well as subclavian catheter, the tip of which is within the right atrium. Some prominent markings noted bilaterally particularly on the right. Basically, little change is apparent when comparison is made to earlier examination of \$24.

IMPRESSION: Chest showing little change since prior examination of L94

Ø7ØØ TIME

N

L T

A

Î 0 N

PATIENT:

DOB: ID#: ROOM:

ORDERING MD:

MD

DATE:

REFERRING MD:

ORDER #: EXAM: CHEST, SINGLE, PORTABLE

CLINICAL DATA: Follow up lung status.

94 compared to CHEST (PORTABLE): Semi-erect AP view 0555 hours one day earlier. No change in the right subclavian central line or tracheostomy tube. Residual infiltrate in both bases, particularly on the right, that show interval improvement. There is also minimal linear atelectasis or fibrosis in the right apex medially, improved. Normal heart size and normal pulmonary vascularity. NO pneumothorax or effusion. Bony structures and osseous structures are stable.

IMPRESSION: Improved appearance to the infiltrates in the lower lung zones as well as in the medial right upper lung. NO new infiltrates. No other change.

TIME: 0800

mij 🎒

M.D.

ORDERING MD: REFERRING MD: MD

ID#: ROOM:

DOB:

DATE:

ORDER #: EXAM: CHEST, SINGLE, PORTABLE

CLINICAL DATA: Follow-up lung status.

CHEST(PORTABLE): 94. Ø615 hours. A film of the chest taken with the mobile unit shows a tracheostomy device in place. The right subclavian catheter remains in place, the tip is just barely within the right atrium. Lungs appear relatively clear except for some prominent markings in the upper lobes particularly on the right and the right lower lobe. Little change since prior examination of -94.

IMPRESSION: Chest showing little change since prior examination -94. Tubes in satisfactory position.

Ø**7**00

Hospital Lincoln, Nebraska

Patient's Name	Admission	n #	Room #	Age	Date of Operation
	-				94
Surgeon	Assistant	Atten	ding Phys	ician	CRNA/MD
Open Incision	Close Incision				

PREOPERATIVE DIAGNOSIS:

Full thickness right lip laceration and cheek laceration

with nasal fracture

POSTOPERATIVE DIAGNOSIS: Same

OPERATIVE PROCEDURE:

Repair 6.0 cm complex right cheek and full thickness lip

lacerations with closed reduction and split fixation of

nasal fracture

FINDINGS AND OPERATIVE PROCEDURE:

ANES: Local

The patient was lying supine in the ER, having been involved in a motor vehicle accident with multiple injuries including a 6.0 cm laceration of the right cheek extending down to the maxilla and through and through the right upper lip. There is a multiply comminuted fracture of the nose as well with left longitudinal displacement. Local anesthesia was obtained using 1% Xylocaine containing 1:100,000 Epinephrine which was infiltrated into the region of the wounds and then cleansed with Betadine solution and irrigated with normal saline. Nonviable appearing fragments of tissue were excised as were jagged irregular margins of the lip and cheek laceration. Hemostasis was obtained using suture ligature of the labial arteries which were vigorously bleeding into the wound. The wound was then reconstructed with initial closure of the right upper lip using Vicryl reapproximation of the muscle fibers and reconstructing the orbicularis or is muscle followed by lip closure with Vicryl approximation of the deep tissue and mucosa and nylon approximation of the skin portions of the lip. Careful attention was given for realignment of the vermillion margin. Additional wound closure was required in the 6 cm cheek laceration which was closed in multiple layers with interrupted Vicryl stitches and the skin edge approximated with running 6-0 subcuticular stitch. Neosporin was applied to the wound. A closed nasal reduction was then performed. Mastisol was placed on the dorsum of the nose followed by application of steri-strips and a plaster nasal splint. While holding this in position a closed nasal reduction was performed using the backside of a scalpel handle. After careful realignment of all nasal bones had been performed, a splint was held in place until dry. A drip sponge dressing was applied. The patient tolerated these portions of the procedure and was prepared to transfer to ICU for treatment of other injuries.

Signed	 	 M.1)



Patient's Name	•	Admission #	Room #	Age	Date of Operation
			ICU	62	94
Surgeon	Assistant	Atte	CRNA/MD		
PREOPERATIVE	DIAGNOSIS:	This lady's histor shortness of brea	y of increas th and respi	ing amou iratory fa	nts of cough and lilure.
POSTOPERATIVE	E DIAGNOSIS:				
OPERATIVE PRO	CEDURE:	Flexible fiberoptic	bronchosco	py.	
FINDINGS AND	OPERATIVE PR	OCEDURE:			
multiple secretion inspection was m	ns and loculated ade of the righ each of the si	d plugs that were a it upper, middle ar	aspirated with the second seco	thout any e. left alv	where we obtained difficulty. Careful veoli and left lower n no evidence of any
Signed	÷	M D			



Patient's Name		Admission #	Room	#	Age	Date of Operation
					62	94
Surgeon	Assistant	A	ttending I	hysicia	ın	CRNA/MD
		•				
Open Incision	1253	Close Incision	1307			
PREOPERATIV	E DIAGNOSIS:	Respiratory ins	ufficiency	, postt	raumatic	
POSTOPERATI	VE DIAGNOSIS:	Same				
OPERATIVE PI	ROCEDURE:	Tracheotomy				
FINDINGS AND	OPERATIVE PR	OCEDURE:				
Dr. cartilage. The fascia was oper and third track trachea. A #6 lodoform gauze	heal rings were i	nsverse incision the midlin e thyroid and the incised. Chromic placed into the omy chest x-ray	two fingerie with blue thyroid suture w trachea.	breadt nt diss retract as plac The we actory	ths below section. sed super sed on eitound was and show	the cricoid The peritracheal riorly. The second ther side of the pelt packed with wed no
Signed	M D:	, M.D	•			

Hospital Nebraska

Atte	nding Physician	62	94 CRNA/MD
Atte	nding Physician	1	CRNA/MD
	•		
cision		· · · · · · · · · · · · · · · · · · ·	
	cision		

PREOPERATIVE DIAGNOSIS:

Automobile accident related head injury

POSTOPERATIVE DIAGNOSIS:

Same

OPERATIVE PROCEDURE:

PEG tube placement

FINDINGS AND OPERATIVE PROCEDURE:

The PEG tube was placed following a tracheostomy performed by Dr. completion of the tracheostomy, the abdomen was bared and palpation revealed no apparent masses in the epigastrium or right upper quadrant. The GIF-XQ10 gastroduodenoscope was introduced into the tubular esophagus, asking the anesthetist to assist, and initially directing it to the cricopharyngeus. We were able to advance it with relative ease down into the stomach which was carried forth on into the second portion of the duodenum. She did have evidence of moderately severe antral gastritis. No specific ulceration was seen, however. Then withdrawing the midportion of the stomach, turning the lights down, we were able to see the light through the abdominal wall. With palpation, we were able to identify location of the apposition of the stomach to the anterior abdominal wall. At this point the anterior abdomen was prepped. A needle was introduced into the stomach and visualized in the stomach. A guidewire was passed through the needle, grasped with a snare, and pulled out through the oropharynx. On completion of this, a #20 Bard PEG tube was introduced and advanced over the guidewire, grasping it as it emerged from the abdomen and pulling the PEG tube into place. After being pulled into place, a 4x4 was placed and it was affixed in position. It was felt that we had attained good position. The patient did tolerate the procedure well. It would be planned to attach it to gravity drainage today and attempt tube feeding in the morning.

Signed		 M.D
	M.D.	

TRANSPORTATION RESEARCH CENTER



ON-SITE AIR BAG INVESTIGATION

SELECTED PHOTOGRAPHS

CASE NO. - 94-18
FLEET - PRIVATE VEHICLE
LOCATION - NEPRASKA
ACCIDENT DATE - 1994

A total of sixty color copies of photographs are presented and referenced as Photograph #01 through Photograph #60. Photographs numbered #03, #05, #07, #10, #11, #13, #15, #16, #22, #23, #24, #43, #44, #46, #48, #50, and #52 were taken and made available by the the photographs were taken by the Transportation Research Center.

1995

Contract Number: DTNH22-94-D-17058

Prepared for:

U.S. Department of Transportation
National Highway Traffic Safety Administration
National Center for Statistics and Analysis
Washington, D.C. 20590



01 -- 1992 Ford Taurus's northward approach on gravel road toward bridge--approximately 100 meters south of guardrail impact



02 -- 1992 Ford Taurus's northward approach toward bridge at ~ beginning of clockwise rotation; NOTE: guardrail impact in cell G6



03 -- On scene view, looking NE, of 1992 Ford Taurus's guardrail impact--see cell E4; NOTE: four-tire clockwise rotation scuffs



04 -- North-northeast view of 1992 Ford Taurus's guardrail impact--see red flag in cells E5--F5; NOTE: guardrail repaired no evidence



05 -- Close-up on scene view, looking NE, of 1992 Ford Taurus's impact with guardrail (cells D4--F5); see RF tire mark near rail



06 -- NE view of replacement guardrail impacted by 1992 Ford Taurus; NOTE: in Photo #05 above guardrail was ripped from holding pin



07 -- On scene view, looking SE, of 1992 Ford Taurus's guardrail impact--see cells D4--F4; NOTE: hole from holding pin in cell D4



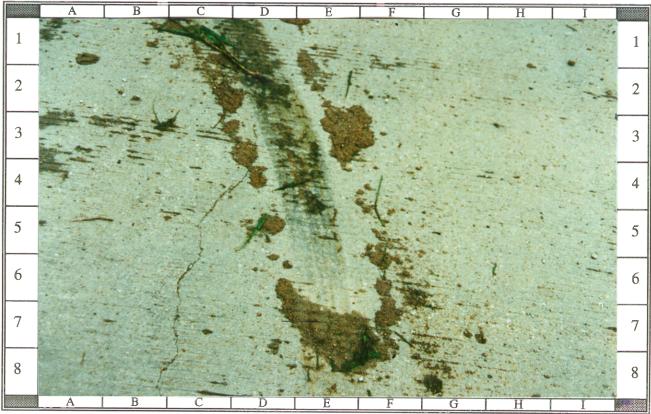
08 -- Northwest view of 1992 Ford Taurus's post-guardrail impact direction of travel onto bridge from behind replacement guardrail



09 -- South-southeast view of 1992 Ford Taurus's ~ initial rest area prior to Taurus's south-southeast movement toward east roadside



10 -- On scene view, looking south, of '92 Ford Taurus's post-guard-rail impact CW travel to initial rest area; NOTE: tire marks



11 -- Close-up on scene view, looking south, of '92 Ford Taurus's LF tire near initial rest; NOTE: mark indicates vehicle in-gear



12 -- South-southeast view of 1992 Ford Taurus's path of travel just prior to departing E side of road & going down steep embankment



13 -- On scene view, looking E-SE from east roadside, of 1992 Ford Taurus's final rest position at bottom of embankment



14 -- East-southeast view from E roadside of '92 Ford Taurus's ~ final rest position (red flag) at bottom of embankment--see cell E4



15 -- On scene view, looking E-SE from mid-point of E embankment, of 1992 Ford Taurus's final rest position at bottom of embankment



16 -- Close-up on scene view, looking E-SE, of '92 Ford Taurus's FRP at bottom of embankment; NOTE: tree & limbs (see cells F1--H5)



17 -- E-SE view from midpoint of E embankment of 1992 Ford Taurus's ~ FRP at bottom; compare tree & limbs (cells G1--H4) in photo #16



18 -- Close-up of 1992 Ford Taurus's ~ FRP at embankment bottom heading E-SE; cell G8 shows embankment impact that deployed air bag



19 -- Closer-up of 1992 Ford Taurus's ~ final rest position at bottom of embankment heading east-southeast; NOTE: no contact to tree



20 -- Closest-up of 1992 Ford Taurus's ~ final rest position at bottom of embankment heading east-southeast; NOTE: no contact to tree



21 -- W-NW view from beyond ~ FRP of '92 Ford Taurus's travel path; see tree & limbs (cells A7--D8) & bag deployment area (cells F5--G6)



22 -- On scene close-up of 1992 Ford Taurus's damaged front bumper viewed from front--offset R; NOTE: soft sandy nature of roadway



23 -- On scene closer-up of 1992 Ford Taurus's damaged front R bumper viewed from FR; NOTE: damaged air dam & grass above bumper



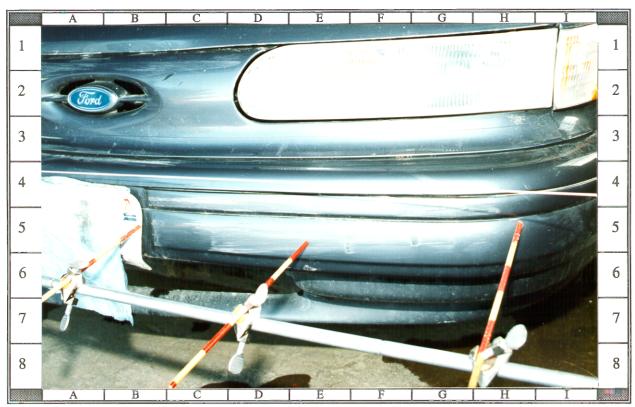
24 -- On scene closer-up of 1992 Ford Taurus's damaged front L bumper viewed from FL; NOTE: damaged air dam & grass above bumper



25 -- 1992 Ford Taurus's frontal damage with contour guage present at bumper level viewed from F; NOTE: damage to air dam on R side



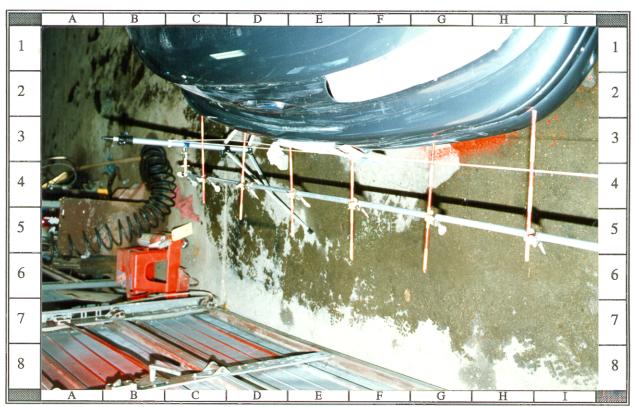
26 -- 1992 Ford Taurus's frontal damage with contour guage present at bumper level viewed from FL; NOTE: bumper scratches & R air dam



27 -- Close-up of scratches on 1992 Ford Taurus's FL bumper from CW rotational impact with guardrail; NOTE: no LF headlight damage



28 -- Overhead view of 1992 Ford Taurus's LF bumper corner; NOTE: misaligned plastic from bumper stroke--see cells D5--E5



29 -- Front reference line view of '92 Ford Taurus's F bumper damage viewed from L; see scratches from bumper stroke (cells D3--E3)



30 -- Close-up of scratches on 1992 Ford Taurus's L outside rearview mirror from impact with limbs of small tree



31 -- Close-up of crack on '92 Ford Taurus's L outside rearview mirror from impact with tree limb--crack most likely during extrication



32 -- Close-up of damage to '92 Ford Taurus's L lower driver door area most likely induced from the rearward movement of the LF fender



33 -- Close-up of scratches on 1992 Ford Taurus's L quarterpanel from impact with tree limbs on slope (e.g., see cells D5 & D3--E3)"



34 -- 1992 Ford Taurus's undamaged rear viewed from rear



35 -- 1992 Ford Taurus's undamaged right side viewed from right front; right rear window was shattered during extrication of driver



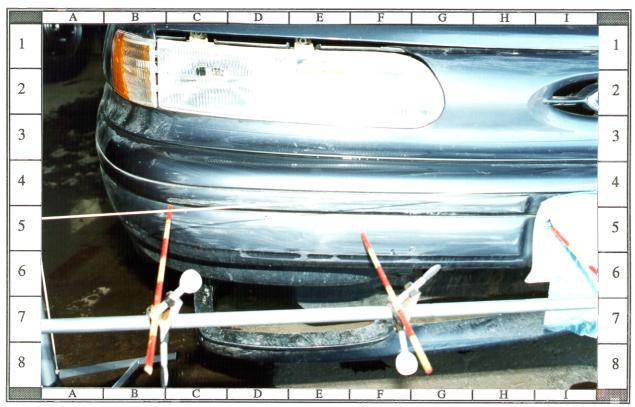
36 -- Close-up of mudflap behind 1992 Ford Taurus's right front wheel; NOTE: damage most likely occurred during travel down embankment



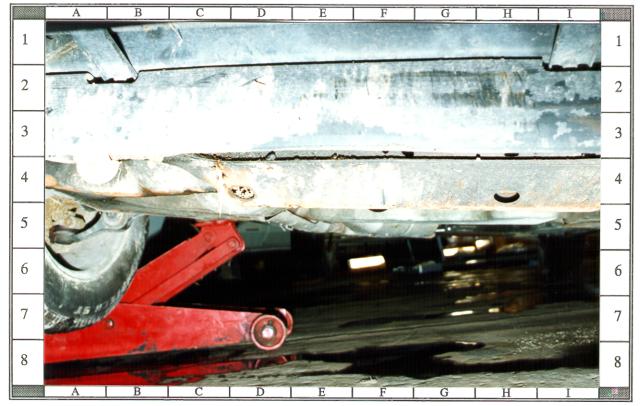
37 -- Front reference line view of '92 Ford Taurus's F bumper damage viewed from R; see scratches from bumper stroke (cells D4--E4)



38 -- 1992 Ford Taurus's frontal damage with contour guage present at bumper level viewed from FR; NOTE: damage to air dam on R side



39 -- Close-up of scratches on 1992 Ford Taurus's FR bumper from CW rotational impact with guardrail; NOTE: no RF headlight damage



40 -- Close-up of 1992 Ford Taurus's right undercarriage damage which deployed driver's air bag & occurred during embankment descent



41 -- Overhead view of 1992 Ford Taurus's F bumper showing scratches from EAD movement caused by guardrail impact (see cells C6--G5)



42 -- Interior view of 1992 Ford Taurus's driver door showing blood splattered on surface when air bag struck driver's bleeding face



43 -- On scene close-up of 1992 Ford Taurus's blood-splattered driver door which occurred when air bag struck driver's bleeding face



44 -- On scene view of 1992 Ford Taurus's blood-splattered driver air bag; driver was bleeding from face when air bag deployed



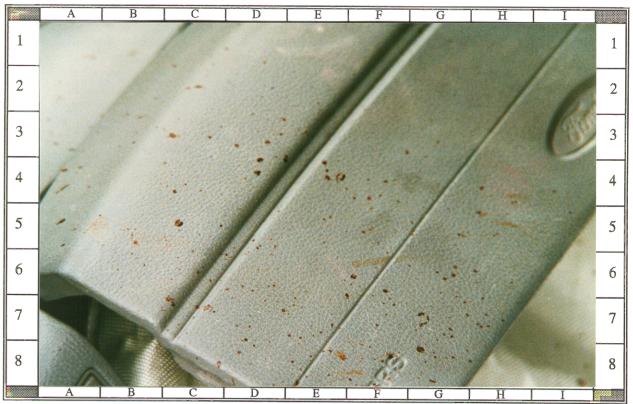
45 -- Interior view of 1992 Ford Taurus's driver area showing contacts to steering wheel and cover flap; NOTE: position of vent holes



46 -- On scene close-up of 1992 Ford Taurus's blood-splattered L dash; NOTE: no contact evidence present



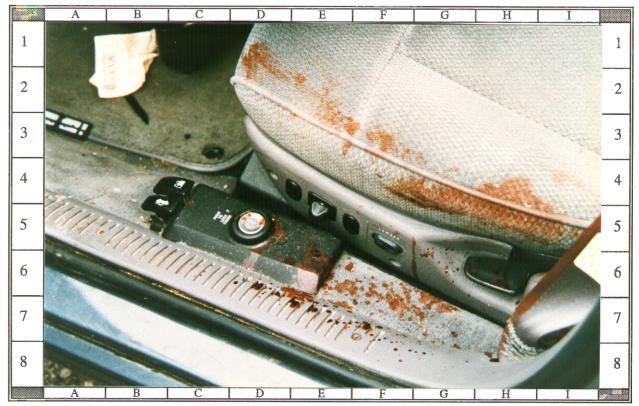
47 -- Close-up of contacts to 1992 Ford Taurus's steering wheel rim & air bag cover flap; NOTE: blood on cover flap



48 -- On scene close-up of 1992 Ford Taurus's blood-splattered cover flap; NOTE: blood indicates bag deployed after facial injury



49 -- 1992 Ford Taurus's driver seat showing restraint usage and blood present on seat, belt webbing--both chest & lap, and sill area"



50 -- On scene close-up of 1992 Ford Taurus's driver seat & left sill showing blood which drained when driver leaned against left door



51 -- Close-up of 1992 Ford Taurus's left lower dash area showing no evidence of driver contact



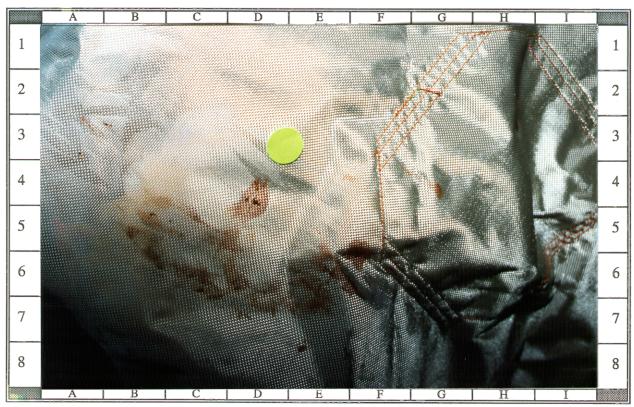
52 -- On scene close-up of 1992 Ford Taurus's blood-splattered centermounted console showing bleeding occurred prior to deployment



53 -- Close-up of 1992 Ford Taurus's bent steering wheel rim--top of rim moved ~ 2.5 cm; NOTE: no contacts to mirror or RF sunvisor



54 -- 1992 Ford Taurus's deployed driver air bag showing blood & contact evidence; NOTE: left yellow dot marks blood & lipstick



55 -- Close-up of left side contact evidence on 1992 Ford Taurus's driver air bag showing blood & lipstick transfer (cells B4--C5)



56 -- Rear center view of 1992 Ford Taurus's driver seating area showing deployed air bag, seat, L A-pillar, L sunvisor/header area



57 -- Rear center view of '92 Ford Taurus's noncontacted rearview mirror, center dash, console, & header, and windshield



58 -- Rear center view of '92 Ford Taurus's noncontacted right dash



59 -- Front occupant seating area of 1992 Ford Taurus viewed from RF door; NOTE: no evidence of contact to windshield or dash



60 -- Rear occupant seating area of 1992 Ford Taurus viewed through RR window which was broken during extrication; NOTE: restraints